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Senate

The Senate met at 2 p.m. and was called to order by the Honorable MARK R. WARNER, a Senator from the Commonwealth of Virginia.

PRAYER

The Chaplain, Dr. Barry C. Black, offered the following prayer:

Let us pray.

Gracious God, we confess our need of Your presence and Your help for the journey ahead. You have promised that You will never fail or forsake us, so we place our trust in You, come what may.

Today, show Your will to the Members of this body in the maze of paths their feet may take. Lead them through the perplexity of issues to reach Your desired destination. Meet them in the thorny questions they confront, through the encircling gloom of indecision, as You open their ears and hearts to hear and heed Your guidance. Lord, keep them from embarking upon a path that is less than Your best.

We pray in Your sovereign Name. Amen.

PLEDGE OF ALLEGIANCE

The Honorable MARK R. WARNER led the Pledge of Allegiance, as follows:

I pledge allegiance to the Flag of the United States of America, and to the Republic for which it stands, one nation under God, indivisible, with liberty and justice for all.

APPOINTMENT OF ACTING PRESIDENT PRO TEMPORE

The PRESIDING OFFICER. The clerk will please read a communication to the Senate from the President pro tempore (Mr. BYRD).

The legislative clerk read the following letter:

U.S. SENATE,
PRESIDENT PRO TEMPORE,
Washington, DC, October 26, 2009.

To the Senate:

Under the provisions of rule I, paragraph 3, of the Standing Rules of the Senate, I hereby

appoint the Honorable MARK R. WARNER, a Senator from the Commonwealth of Virginia, to perform the duties of the Chair.

ROBERT C. BYRD,
President pro tempore.

Mr. WARNER thereupon assumed the chair as Acting President pro tempore.

Mr. REID. Mr. President, I note the absence of a quorum.

The ACTING PRESIDENT pro tempore. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mr. REID. I ask unanimous consent that the order for the quorum call be rescinded.

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

RECOGNITION OF THE MAJORITY LEADER

The ACTING PRESIDENT pro tempore. The majority leader is recognized.

SCHEDULE

Mr. REID. Mr. President, following leader remarks, the Senate will turn to a period of morning business. Senators will be permitted to speak for up to 10 minutes each. As announced earlier, there will be no rollcall votes today. The next vote will occur at about 2:15, Tuesday, October 27. That vote will be on the confirmation of the nomination of Irene Berger to be U.S. district judge for the Southern District of West Virginia. Upon disposition of the nomination, the Senate will immediately proceed to vote on the motion to invoke cloture on the motion to proceed to H.R. 3548, the unemployment compensation extension. In addition to considering the unemployment bill this week, we hope to consider the Commerce-Justice-Science appropriations bill and the Military Construction appropriations bill. We also need to pass a continuing resolution before the end

of the week because the current CR expires Saturday night. We also expect to pass the 6-month highway extension bill.

MEASURE PLACED ON THE CALENDAR—S. 1858

Mr. REID. Mr. President, I am told that S. 1858 is at the desk and is due for a second reading.

The ACTING PRESIDENT pro tempore. The clerk will report the bill by title for the second time.

The legislative clerk read as follows:

A bill (S. 1858) to require Senate candidates to file designations, statements, and reports in electronic form.

Mr. REID. Mr. President, I object to any further proceedings with regard to this bill.

The ACTING PRESIDENT pro tempore. Objection is heard.

The bill will be placed on the calendar.

WALL STREET NARROW-MINDEDNESS

Mr. REID. Mr. President, the global economic crisis is very complicated. It was born of both brazen, unabashed abuses and elaborate schemes alike. It brought complex concepts such as "mortgage-backed securities" and "credit default swaps" and "derivatives trading" into our everyday vocabulary. Prior to this financial meltdown, rarely did we hear the words "mortgage-backed security," "credit default swaps" or "derivative trading," but now they are in every newspaper we read. They are all over the television, all over radio. But when we peel back all the layers of this crisis, its foundation is nothing more than a simple concept: greed. When we cut through to the root causes of why so many families are hurting and why so many businesses are suffering, the core elements are evident: excess, irresponsibility, and reckless risks.

● This "bullet" symbol identifies statements or insertions which are not spoken by a Member of the Senate on the floor.



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Wall Street ran wild, then it ran out of steam. Last year's emergency required an urgent dose of medicine, and we supplied it. Our entire national economy was on the brink. Our entire world economy was on the brink. Our swift action prevented a terrible situation from getting even worse. For the past year, we have continued to act in strong, sensible, and prudent ways. We taxpayers did what we needed to do to help keep the economy afloat and didn't ask much from Wall Street in return. We would have gladly accepted a simple "thank you."

So one can understand America's disgust upon realizing in recent days that Wall Street has ignored the lessons of last year. Reckless Wall Street traders continue to write themselves checks for billions of dollars—much of it our dollars. The Wall Street Journal found that major banks and securities firms are going to pay their employees \$140 billion this year. That is a record high, and 20 percent more than last year. But the greed is evident not only in salaries; it is in bonuses and other benefits also. The Washington Post reported that the Nation's biggest financial firms, including the firms that took nearly half the emergency TARP money, are actually increasing the perks they are handing out to their employees this year.

Here is what is happening on Wall Street today: CEOs are giving their traders huge incentives—usually cash bonuses—to swing for the fences and make deals that put their entire firms and the larger system at risk. That is the height of irresponsibility. It is the height of arrogance. Risky bets on exotic securities are precisely what sparked the financial crisis and fueled the housing crisis. These events devastated Nevada and many other States. But that same carelessness continues, I am sad to say, on Wall Street today. A gluttonous glorification of the bottom line led to the credit crisis that has led so many hard-working families into bankruptcy and worse. But that same narrow-mindedness continues to guide financial firms today. Short selling and shortsightedness—rewarded with stratospheric salaries and bloated bonuses—contributed to a shameful culture of excess. Yet that same greed continues today.

A bonus that dwarfs an average American worker's entire annual salary is excessive. Doing so in a way that threatens our economy is dangerous, wrong, and a slap in the face to the American people. Main Street jobless rates and Wall Street bonuses should not rise at the same time. Seniors who rely on Social Security should not be shortchanged while the traders who threaten our economic security are rewarded. Taxpayer money that was supposed to keep our economic pillars from collapsing should not go directly from your savings to a brash broker's pocket.

If the executives who designed these windfalls came out of their corner of-

fices, they would see how badly Americans are suffering. They would see how offensive these paydays are. They would see how desperately hard-working families are struggling to hold on to their jobs, to their homes, and to health care. And they would be ashamed.

We must put an end to the recklessness that got us into this mess. We cannot accept more of the same.

Last week, the Treasury Department announced that it would reasonably limit the excessive paychecks of the top executives at companies in which you and I and every American now own an equity stake. I support that plan. Then the Federal Reserve announced it will rein in banks that reward the riskiest practices—gambles that endanger all of us. They should be reined in. I support that too.

In the near future, we will reform our financial industry through legislation commonly referred to as regulatory reform. We will make sure banks are compensating their employees in a prudent way. That means firms won't be able to throw cash at a trader who closes a big, risky deal—one that puts the whole bank at risk and that threatens taxpayers and the greater financial system as well.

The Treasury, the Fed, and the Congress will play their parts. Regulation has its role, but I have never believed government is the answer to everything. That is why Wall Street has to take responsibility for its own actions also.

This industry, more than any other, knows the importance of sending signals. The stock market hinges on hints, the trading floors run on rumors, and these public companies live and die by the confidence they instill, the impressions they inspire, and the messages they send. So these firms—whether or not they owe the government for their survival—should be careful about what their actions say about them because the American people are listening closely. Greed got us into this mess; it will not get us out. If we are going to continue to recover and ultimately prosper, this perverse culture and destructive behavior cannot continue. How many more times must we learn the same lesson?

Mr. President, I suggest the absence of a quorum.

The ACTING PRESIDENT pro tempore. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mr. REID. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

UNANIMOUS-CONSENT REQUEST— H.R. 3548

Mr. REID. Mr. President, I ask unanimous consent that the Senate proceed to the immediate consideration of Cal-

endar No. 174, H.R. 3548, and that the following amendments be the only first-degree amendments in order, except in the case where the second-degree or side-by-side amendment is indicated, with the majority amendment to be voted first in any sequence of a second-degree or side-by-side amendment; that general debate time on the bill be limited to 1 hour equally divided and controlled between the leaders or their designees; that debate time on any first-degree amendment be limited to 60 minutes equally divided and controlled in the usual form; and that debate on any second-degree or side-by-side amendment be limited to 30 minutes equally divided and controlled in the usual form:

Reid-Baucus substitute amendment No. 2668, to be modified, and that any debate time on this amendment be within the parameters of time available on the bill; Baucus side-by-side amendment regarding home buyer tax credit/net operating loss/tax relief; Isakson-Dodd amendment regarding home buyer tax credit—Mr. President, for everybody here, I note that the Baucus side-by-side relates to the Isakson-Dodd amendment and another amendment that was given to us earlier by Senator BUNNING; this covers both of those—McConnell amendment regarding tax relief; Johanns amendment regarding alternative substitute; Corker-Warner amendment regarding TARP; that upon disposition of the listed amendments, the use or yielding back of all time, the substitute amendment, as amended, if amended, be agreed to; the bill, as amended, be read the third time, and the Senate then proceed to vote on passage of the bill.

The ACTING PRESIDENT pro tempore. Is there objection?

Mr. McCONNELL. Mr. President, reserving the right to object, and I will have to object, I am going to offer a counter unanimous-consent request that includes a universe of eight amendments. The majority leader has six.

We would be happy to accept short time agreements. It strikes me that under my consent agreement we would finish about as rapidly as we would under the consent agreement the majority leader just propounded.

With that, I object.

The ACTING PRESIDENT pro tempore. Objection is heard.

Mr. REID. Mr. President, I say to the senior Senator from Kentucky that I think the amendments we have suggested are in keeping with what we are trying to do. We deal with a first-time home buyer tax credit. We deal with the loss carryback, which people talk about being very important. We talk about another bipartisan amendment offered by the Senator from Virginia and the Senator from Tennessee, setting up a program where there would be trustees to oversee the ownership we have in various TARP properties. I think we have been so reasonable.

I understand my friend, the Senator from Kentucky, not being able to agree

at this time. I hope we can get this done. I do not want to have just a vote on cloture. I think probably on this we could do it, but I think it is the wrong message that we cannot work out some amendments.

I see no reason that we have to do immigration on this bill; that is what E-Verify is about. I don't know how many more times we have to pound on ACORN. We have voted on that many times already. I think we are being reasonable.

I think Senator BUNNING, if he would look at the amendment we have suggested, which is out of the Finance Committee—and it is my understanding it is bipartisan—which would cover net operating losses, then Senator BUNNING would get everything he asked for under his amendment. It is just where the money would come from. It is all paid for.

UNANIMOUS-CONSENT REQUEST— H.R. 3548

Mr. MCCONNELL. Mr. President, again, the two consent agreements have a universe of six amendments on my friend's side and eight on our side. We are willing to agree to short time agreements on each amendment. I am fairly confident in saying it would not take much more floor time, if any, to pursue the underlying bill, which almost everyone supports, in a form that would encompass the opportunity to offer eight amendments.

With that, I ask unanimous consent that the Senate proceed to immediate consideration of H.R. 3548, which was received from the House, and that the following amendments be the only amendments in order:

Reid-Baucus substitute; Baucus side-by-side amendment for housing tax credit; Isakson-Dodd, home buyer tax credit; Johanns, alternative substitute; Vitter, ACORN; Bennett-Thune, TARP sunset; Corker-Warner, TARP; Sessions, E-Verify; Bunning, operating losses.

I further ask unanimous consent that following the disposition of the above-listed amendments, the bill, as amended, be read the third time, and the Senate proceed to a vote on passage.

The ACTING PRESIDENT pro tempore. Is there objection?

Mr. REID. Reserving the right to object, frankly, I think it is unfortunate that we could not just vote on extending the unemployment benefits for the masses in our country who are out of work and are desperate. There are thousands and thousands of people who are waiting for us to get something done.

The issues that are brought up are issues we can deal with, but it should not be at the expense of wasting all this time. We have been trying to get this done—the unemployment extension—for weeks. With each day that goes by more people in America have less money. If we want to talk about stimulating the economy, try giving a

check to somebody who is out of work. They spend that money.

I will continue to try to be fair and reasonable with the Republicans, who are so bound and determined to slow us up on everything, including checks for people who are desperate for work. I hope we don't come to a point where we have to just vote on extending unemployment benefits. That would be unfortunate. The proposals they have made are unnecessary, but I am trying to go above and beyond what is fair. We are willing to step way in the other direction just to move things along. But to vote on immigration matters and on ACORN, which we have done so many times, is only dilatory.

Mr. MCCONNELL. Mr. President, as my good friend, the majority leader, knows, the easiest way to move it along is with a time agreement, as opposed to going through the normal processes in the Senate. I have a feeling the majority leader wants to object to my consent.

Mr. REID. I object.

The ACTING PRESIDENT pro tempore. Objection is heard.

Mr. MCCONNELL. Mr. President, the reason for having a consent agreement is to expedite the process, do it more quickly. We have two competing consent agreements: one with six amendments and one with eight. Either one would move the process along. We will continue to talk about it and, hopefully, we can get this worked out in a way that is mutually satisfactory.

UNANIMOUS-CONSENT REQUEST— H.R. 3548

Mr. REID. Mr. President, these are not competing consent agreements. This is an effort to try to get something the American people should have—the most unfortunate people who have been out of work for an extended period of time—which is unemployment compensation checks.

I ask unanimous consent that we pass H.R. 3548 with no amendments; that is, benefits that will go to people who have been out of work for an extended period of time. This is an act to amend the Supplemental Appropriations Act of 2008 to provide for the temporary availability of certain additional emergency unemployment compensation. I hope we can move forward with that.

The ACTING PRESIDENT pro tempore. Is there objection?

Mr. MCCONNELL. Mr. President, reserving the right to object, we have just had a discussion about two consent agreements, each of which has a very limited number of amendments. There is no reason we cannot reach an agreement to take up the underlying bill, with a limited number of amendments, and finish the bill expeditiously.

Simply cutting people off and not allowing any amendments at all is not an acceptable approach. Therefore, I object.

The ACTING PRESIDENT pro tempore. Objection is heard.

Mr. REID. Mr. President, it is not a question of having no amendments. We agreed to have six. I think that is unnecessary. My friends in the minority are continuing to slow-walk unemployment compensation, while people are desperate for these small checks that they get to keep the rent paid and pay for groceries for their kids. I think we should do this today, get it done now.

I understand there is an objection. I think it is unfortunate.

Mr. MCCONNELL. Well, Mr. President, the only thing that would slow this down would not be to reach a consent agreement. We will continue to talk to the majority leader and, hopefully, we can reach an agreement for a reasonable amount of amendments.

I yield the floor.

RESERVATION OF LEADER TIME

The ACTING PRESIDENT pro tempore. Under the previous order, leadership time is reserved.

MORNING BUSINESS

The ACTING PRESIDENT pro tempore. There will now be a period of morning business, with Senators permitted to speak therein for up to 10 minutes each.

The Senator from Tennessee is recognized.

THE PUBLIC OPTION

Mr. ALEXANDER. Mr. President, I will let the majority leader make his own announcements, but there are a lot of discussions in the news media today that in a short period of time he intends to hold a press conference announcing that he will push ahead with the so-called public option in the health care legislation—one that currently includes an opt-out provision for States.

I don't know whether he intends to do that or whether he doesn't. He is entitled to make his own announcement, as I said. But it provides a good opportunity to talk about what we mean by a public option in health care, or a government-run health care plan, putting government in the health care business, and how it already works, and how it might work if States were allowed to opt out.

The reason it is easy to talk about this is—and the former Governor of Virginia, who is presiding, knows this as well as I do, and maybe better because he has been Governor more recently—we already have in existence in the United States today a public option health insurance program which States may opt out of. It is called Medicaid.

Medicaid is the largest government-run program we have in health care—even larger than Medicare. Medicare, for older people, has about 40 million persons who depend on it. Medicaid,

which sometimes offers confusion, is a different program. It is a program for low-income Americans. It started out for women and children, but it gradually expanded, and today it has nearly 60 million Americans who depend on it. The health care legislation, which is coming forward in the Baucus bill out of the Finance Committee and the HELP Committee, on which I serve, and the bills in the House of Representatives—all those pieces of legislation would expand the Medicaid Program—not Medicare for seniors but the Medicaid Program—and send part of the bill for that expansion to the State.

So let's talk about that a little bit, particularly if it is true that the majority leader is about to propose that we have yet another government-run insurance program, giving the States the right to opt out, which sounds pretty good. Let's see how this one works that we already have, especially since the health reform bill that is headed our way would expand Medicaid, and according to the Congressional Budget Office, cost States an additional \$33 billion in State dollars and add 14 million people to Medicaid.

I guess the first thing to know about a government-run health insurance program which States can opt out of is that they can't. I mean, in the real world, they can't. Not one has. Every State in America has Medicaid. The Federal Government pays roughly 60 percent of it; State taxpayers pay the rest. Most of the rules are written in Washington. States can ask for exemptions from the rules, but it is a long and burdensome process. It is not realistic to say the States can opt out of the Medicaid Program for low-income Americans. I suppose it might not be realistic, therefore, to say the States would be able to opt out of a new government-run program—a government-run, public-option program—that may be suggested by the majority leader. We should wait and see what he proposes, but I think we would be wise to pay attention to the fact that in the current government-run program we have today, no State finds it realistic to opt out.

Expanding Medicaid, which is what the health reform bill coming toward us on the floor proposes to do, is not just an expensive item for the Federal Government and for States, it is a terrible vehicle for health care reform. The current Governor of Tennessee—Governor Bredesen—a Democrat—has said putting more low-income Americans into Medicaid is not health care reform. Why would he say that? Because it makes it worse for those Americans as they seek to get access to care from doctors and hospitals and as they seek to get good, quality care. Plus, the program is riddled with so much fraud and abuse that, according to the Congressional Budget Office, \$1 out of every \$10 is stolen or wasted.

Most Governors who have struggled with Medicaid—and I am one of them—agree that its expansion is a bad idea.

They unanimously have said to us in Congress that if you in Washington want to expand Medicaid, then you in Washington need to pay for Medicaid. That is the theory of no more unfunded mandates that every Governor whom I know about has agreed with for years. In fact, there was nothing that used to make me angrier as a Governor than for a distinguished politician in Washington to stand, make a speech, come up with a good idea, hold a press conference declaring a problem solved, and then send the bill to the States. So what does the Governor and the legislature and the mayor and the city council have to do? They have to cut services, they have to raise taxes, they have to run up tuition, they have to cut out some classes because somebody in Washington thought it was a good idea to do this. Well, that is what we are proposing to do with Medicaid. We are saying to the States: We have a great idea. We want to expand Medicaid by dumping another 14 million low-income Americans into this program, but congratulations, we are going to send you the bill to help pay for it.

The Washington Post quoted my home State Governor, Governor Bredesen, to whom I just referred, this way in regard to health care reform:

I can't think of a worse time for this bill to be coming. I would love to see it but nobody is going to put their State into bankruptcy or their education system into the tank for it.

One of the most painful letters I have ever read was from Governor Bredesen, which he sent on October 5, when he wrote about Tennessee's fiscal situation—similar to the condition in most States. He said:

By 2013 we expect to return to our 2008 levels of revenue and will have already cut programs dramatically—over \$1 billion. At that point we will have to start digging out—we will not have given raises to State employees or teachers for 5 years. Our pension plans will need shoring up. Our rainy day fund will be depleted . . . we will not have made any substantial investments for years . . . There will be major cuts to areas such as children's services. On top of these, there are the usual obligations that need to be met—Medicaid, for example, will continue to grow at rates in excess of the economy and our tax revenues.

Our idea of health care reform is to expand Medicaid and send Governor Bredesen a bill for \$735 million over the next 5 years, which we can't afford.

The other legislation, from the HELP Committee, would cost the States even more. According to an actuarial report from the Centers for Medicare and Medicaid Services, Medicaid represented 40 percent of the Federal Government's cost expenditures for health care; 41 percent of State health care costs. It is the largest source of general revenue-based spending in health services—larger than Medicare.

I can vividly remember, 25 years ago, 30 years ago, as Governor, every time I made up a budget, I would start with roads. That comes from the gas tax. I

would go to prisons. The court said to fund that, I would go to K-12 grades. Our Presiding Officer, the former Governor of Virginia, has had this experience. That is pretty much a set thing. Then you get down to the end and what are you choosing between? You are choosing between higher education—the University of Tennessee or the University of Virginia—and Medicaid. What is happening? Medicaid is going up like a rocket and State spending for higher education is flat. Our great higher education systems across this country are under great stresses because of poor State funding because we have allowed Medicaid to grow out of control.

Not only do we do that, we are now about to expand it—about to expand it and send more of the bill to the States. The Governors are saying: Don't do that. Their revenues are down 17, 18, 20, 35 percent in some States. If you are going to pass it, they say: Pay for it. That is a question Governors should have a chance to ask and get an answer to.

According to the Texas Medicaid office, the current proposal to expand Medicaid will cost the State \$20 billion over the next 10 years. We are passing it, they are paying for that much of it. According to the South Carolina Governor's office, \$1.1 billion over 10 years. Governor Schwarzenegger has said for California it could be as high as \$8 billion a year.

A New York Times article, in late September, said this:

The recession is driving up enrollment in Medicaid at higher than expected rates, threatening gargantuan State budget gaps even as Congress and the White House seek to expand the government health insurance program for the poor and disabled . . .

The New York Times went on to say:

. . . enrollment in state Medicaid programs grew by an average of 5.4 percent in the previous fiscal year, the highest rate in 6 years. . . . In eight states, the growth exceeded 10 percent.

So States have headlines such as this: "State Looks at \$1 Billion in Cuts." Their Medicaid is already growing at a rate faster than they can pay for, and we are sending them more bills than they can pay for.

Mr. DURBIN. Will the Senator yield for a question?

Mr. ALEXANDER. I will be happy to yield.

Mr. DURBIN. We had a bill considered earlier this year—a stimulus bill—that sent \$80 billion to the States so they could deal with the expenses of Medicaid during the recession and also, obviously, their State's declining revenue, an attempt for us to help Governors facing the horrible decisions which the Senator described.

If I recall correctly, only three Republicans voted for President Obama's stimulus package to help these States with \$80 billion in aid. Would the Senator like to factor that into his conversation about sensitivity to what the States are facing?

Mr. ALEXANDER. I thank the distinguished assistant Democratic leader for raising the point. It is a point I would be delighted to address.

I voted against that proposal. That proposal was a backdoor effort in what was a so-called jobs bill to spend \$85 billion over 2 years for Medicaid. That is one reason why we have 10 percent unemployment today, because the money that was supposed to be for the stimulus was borrowed from the biggest deficits we have ever run up in history and spent on something other than jobs.

What it also did was it unrealistically lifted the level of Medicaid spending in Tennessee and every other State, forcing an expansion of that program, which I will go on to show in a minute is nearly cruel to the people who are dumped into the program because doctors and hospitals will not serve them.

So I was glad to vote against that program. I was sorry it passed because it borrowed money we don't have to spend on programs that didn't create jobs, and it artificially lifted and expanded Medicaid, which is already bankrupting the States.

Medicaid expansion is not real health care reform. One reason is because 40 percent—according to a 2002 Medicare Payment Advisory Committee survey—of the physicians restrict access for Medicaid patients; meaning they will not take new Medicaid patients because reimbursement rates are so low. Only about half of U.S. physicians accept new Medicaid patients compared with more than 70 percent who accept new Medicare—those are the seniors—patients.

According to a 2002 study in the *Journal of American Academy of Pediatrics*, the national rate for pediatricians who accept all Medicaid patients was 55 percent. In Tennessee, it was lower than that. Why is that? It is because reimbursement rates are so low. Today, doctors who see patients who are on Medicare get paid about 80 percent of what private insurers pay. Doctors who see patients who are on Medicaid get paid about 61 or 62 percent of what private insurers pay. For doctors who see children, it is sometimes lower than that. So doctors don't see those patients. What is going to happen if we dump 14 more million low-income Americans into a system such as that? Those patients—especially those children—are going to have a harder time finding doctors and hospitals to take care of them. It would be akin to giving somebody a ticket and a pat on the back to a bus line that only operated 50 percent of the time.

Further, the quality of care for Medicaid patients is significantly lower than those with private insurance and even those with no insurance. According to a survey by the National Hospital Ambulatory Medical Care, Medicaid patients visit the emergency room at nearly twice the rate of uninsured patients. A 2007 study by the *Journal of the American Medical Association*

found that patients enrolled in Medicaid were less likely to achieve good blood pressure control, receive breast cancer screening, have timely prenatal care than similar parents in private plans, and they had lower survival rates.

I mentioned this a little earlier. According to the Government Accountability Office, Medicaid—the program we are seeking to expand, the government-run insurance program that sounds so good, the so-called largest public option plan we have to date, the plan where about half the doctors will not take new patients who are on the program—had \$32.7 billion in improper payments in 2007 alone; 10 percent of the program's total spending is wasted.

So as we consider a so-called public option, I hope we will look at the public option we already have—called Medicaid—one which already has an opt-out provision for States, one which already has 60 million low-income Americans in it, one into which we plan to put 14 million more Americans, so that 50 percent of the doctors will say to new patients: I can't see you because the reimbursement rates are so low. Medicaid is the public option we have right now. States could opt out of it, but quality is low, fraud is high, costs are up, and Governors of States on both sides of the aisle are saying: We are headed toward bankruptcy at the present rate. If you are sending us more bills, if you want to expand it, pay for it. And doctors are turning away patients.

The American people deserve better than that. I am a cosponsor of a bipartisan bill that would actually reduce the number of patients on Medicaid. It is called the Wyden-Bennett bill. It adds no cost to the government. That bill is not being seriously considered.

The other approach that we Republicans believe we should take is focusing on reducing costs to the government, focus on reducing the cost of premiums; take four or five steps in the right direction and expand services to uninsured patients as we go. One way to do that, of course, would be the Small Business Health Insurance bill, which has broad support in both Houses, which would permit small businesses to come together and pool their resources. The estimates are that at least 1 million more Americans would be covered by employer insurance if that were to happen. Some estimates say many more millions.

But especially on a day when the press has it rumored that the majority leader may offer a new government-run insurance program with the States having the opportunity to opt out, I hope Americans will look carefully at the current government-run insurance program which States have the option to opt out of, but none do, and note that it has 60 million Americans—it is soon to have 74 million; half the doctors won't see new patients because of reimbursement rates; and \$1 out of \$10 is wasted. It is not a solution to health care and neither is a new public option.

I yield the floor and thank the Senator from Illinois for his question.

The ACTING PRESIDENT pro tempore. The Senator from Illinois is recognized.

HEALTH CARE REFORM

Mr. DURBIN. Mr. President, I think we ought to step back and take a look at this health care debate. The Senator from Tennessee has raised some interesting questions that we should consider and discuss.

The reality in America today is that the cost of health care is out of control. We know it as individuals because the health care premiums keep going up. In fact, the health insurance industry not only announced but threatened 2 weeks ago that if we pass health care reform, premiums are going to go up again. Businesses are now reporting they anticipate the cost of health insurance premiums to cover their employees to go up at least 15 percent next year.

This is not new. Unfortunately it has become a pattern, a pattern that continues to raise the cost of health insurance across America. Fewer businesses offer protection, fewer individuals can afford to buy health insurance, and that is the reality, where we are today.

We have put forward now five different proposals, and the sixth is coming, to deal with health care reform. President Obama challenged this Congress to work together on a bipartisan basis to solve this problem, to bring costs under control. During the course of our debate on it, we identified some other serious problems in our health care system. We know what the health insurance companies do to people across America. They hire literally hundreds if not thousands of employees to sit in front of computer terminals with a sign above them that says just say no, so when the doctor calls and says I wish to admit Mrs. Smith for surgery or I wish to keep her in the hospital an extra 2 days, the answer is no and the battle is on. I know this because I have been in the hospitals of my hometown of Springfield, IL, standing with doctors at the nurses desk as they call the health insurance clerks in faraway States and beg them to allow a person to stay in the hospital so she will be there the night before her surgery. They were turned down and one doctor turned to me and said, "I cannot in good conscience send this woman home. I am going to have her stay and we will fight them later on." I said, "Does this happen often?" And he said, "All the time."

Fighting health insurance for coverage when you need it the most, as they go through your application and find out that you did not put in some minor medical experience that you had—you know, it is not a fanciful story. In fact, it is a sad story. People have been turned down for coverage for health insurance when they need it the most for surgery because they failed to

disclose they had acne when they were teenagers. It sounds as though I am making that up, but I am not. That is a fact. When they want to turn you down, any excuse will do. We know this is happening. People, because of pre-existing conditions, are being denied coverage. When they need their health insurance the most, after paying into it year after year, here comes that diagnosis that is going to require expensive treatment or a surgery or hospitalization or missing work, they find out the coverage is not going to be there or there is going to be a cap on the coverage.

We know these stories. We live with these stories. People are calling us, saying the health insurance company says no, they won't pay for it. And the battle is on. So part of health care reform is to deal with this health insurance reform too.

I have to say in all candor to my Republican colleagues, they have yet to come forward with any proposal for health care reform. They just say no. Whenever we come up with a proposal, it is not good enough, it doesn't reach the goals they want to reach. But when we ask them what would you do, they have nothing. When the HELP Committee, which is the Health, Education, Labor, and Pensions Committee of the Senate, now under the chairmanship of Senator HARKIN and then under the temporary chairmanship of Senator CHRIS DODD of Connecticut while Senator Kennedy was going through his cancer therapy—when they considered this bill they had literally hundreds of amendments, 500 amendments in open hearing as they went through this bill.

It is not a surprise. This is a big undertaking. Health care reform is the biggest domestic issue we have ever faced in this country—ever. It comprises one-sixth of our economy. There were 500-plus amendments, day after day, hour after hour, debating back and forth. At the end of the day, the bill was finished. The committee had adopted over 150 Republican amendments they had offered to the bill. Senator DODD believed it had a fair hearing—it is a bipartisan bill with input from both sides—and he called the roll in the committee to see if we could move the bill forward to the floor. Not one single Republican Senator would vote for it. Even after adding all those amendments they would not stand up and vote for the bill to move forward to the floor. Again, faced with the challenge of writing a bill, it is easier to stand back and say here is what is wrong with what you are doing. But in good faith they should step forward and be part of it.

Senator MAX BAUCUS in the Senate Finance Committee had one of the toughest assignments. He had to deal not only with policy but also with paying for it. That is what the Senate Finance Committee is all about. So what Senator BAUCUS did, for months, was to engage three Republican Senators on his committee: Senator GRASSLEY of

Iowa, Senator ENZI of Wyoming, Senator SNOWE of Maine. Three Democratic Senators sat down with three Republican Senators and said let's come up with a bipartisan bill. Let's try to reach agreement among ourselves as to how to do this in a bipartisan fashion. Eventually, after literally months of trying, two of the Republican Senators left, leaving only Senator SNOWE of Maine, who ultimately supported the committee bill that came forward.

She is an unusual profile in courage in the Senate. She is the only Republican in the House or Senate who has ever voted in committee as a Republican to bring a bill forward on health care reform. It showed extraordinary courage on her part. But it also showed that despite the best efforts in both of these committees in open session and in closed meetings, we could not get Republican buy-in for health care reform. They are opposed to everything.

Unfortunately, to be opposed to everything is not a way to solve a problem. The current health care system in America is unsustainable. It costs too much. The costs are going up too fast—not just for individuals, families, and businesses, but for government as well. The health insurance companies are running roughshod over people who, when they need it the most, cannot count on the health insurance protection they thought they had purchased. It is a reality that in the bankruptcy courts across America today, two out of three people filing for bankruptcy in America are filing because of medical bills. It has grown over the last few years from one out of three to two out of three. Sadly, that percentage is going to continue to grow because you know what happens—a person goes in after an accident, a diagnosis, goes into the hospital for what appeared to be a brief stay and the next thing you know a bill comes rolling through for \$80,000 or \$100,000 or more. These bills pile up in an amazing fashion and you have no control over them. You are there at the instruction of your doctor, receiving the care the doctor said you should receive. You don't stop before the nurse leaves the room and say how much do those pills cost? It is the reality that we are helpless, defenseless, when we are in that position.

So people have these medical bills stack up in an attempt to find a cure or to save a life. At the end of the day, the health insurance doesn't cover them. They file for bankruptcy. But here is the statistic you should remember. In addition to 2 out of 3 people in bankruptcy because of medical bills, 74 percent of those people filing for bankruptcy because of medical bills have health insurance. They are not uninsured. They have health insurance that was not there when they needed it; health insurance that cut them off when they thought they had coverage; health insurance that had a limit on how much it would pay and they were left in a position where they were

about to lose everything. They may be able to hang onto a truck or a toolkit or maybe even a small home, but their savings are gone, wiped out, because of a diagnosis or an accident.

That is the reality of where we are today and why we continue to engage this issue, despite the controversy that surrounds it.

Senator HARRY REID is the majority leader in the Senate and he has a tough job. He is in the process of taking the two bills prepared by the Senate committees, bringing them together into something that can pass the Senate. It is hard. There are a lot of policy questions and a lot of strong feelings. Within the Senate Democratic caucus are members who are very conservative, moderate, and liberal. We have it all, a wide range. We agree on some things but there is disagreement when it comes to other things. One of the questions that came up, one of the issues of controversy, was about the so-called public option. In shorthand, the public option is an attempt to create some form of health insurance protection that is a not-for-profit plan—it doesn't have to worry about paying profits to shareholders; isn't going to buy a fortune's worth of advertising; doesn't have to hire a lot of clerks to say no but tries to keep costs under control and compete with private health insurance companies.

We should be concerned about this because, without a public option—and it is only an option—without a public option, these health insurance companies have virtually no restrictions on what they can charge us. I say that because health insurance—insurance in general but health insurance companies—enjoy special treatment under American law. There are only two businesses in America that are exempt from antitrust law. One happens to be organized baseball; the other, the insurance industry. You say: What does that mean? It means that back 110 years ago when they took a look at the insurance industry, they argued that because it was subject to State regulation in every State, it was not interstate business. Students of the Constitution know there is an interstate commerce clause there that gives the Federal Government authority when we are dealing with interstate business. So health insurance companies and insurance companies in general were judged to be State businesses and exempt from antitrust law.

Then fast forward about 50 years. The Supreme Court took a look at insurance companies and said this has changed. These are no longer small insurance companies regulated State by State. They are now doing business nationwide, and so the Court decided in the 1940s that the exemption from antitrust law would no longer apply. A Senator from Nevada serving at that time, Senator McCarran, offered the McCarran-Ferguson bill, which became law and exempted insurance companies from antitrust laws.

That is a long lead-in to where we are today. What it means is that the insurance companies, unlike any other businesses in America, can literally meet in a closed room and decide to fix their prices. They will decide what premiums they will charge for insurance policies all across America. They can decide to allocate the market. One insurance company X, you take Chicago; insurance company Y, you take St. Louis; insurance company Z, you get New York. Any other business that tried to do that would be sued by the Federal Government for restraint of trade, for killing competition. But they are exempt and that is a fact.

So when the insurance companies, health insurance companies, tell us they are going to raise premiums, mark their words; they are going to do it and they have the power to do it and they can do it speaking as one and we cannot stop them under the current law as it exists. That is the reality.

The public option says there at least will be a choice out there for everybody who is in an insurance exchange, looking for a choice. There will at least be a choice out there that is not a private health insurance company: a not-for-profit company, not subsidized by the Federal Government, that is going to deal with providers across America to try to bring costs down.

The Senator from Tennessee said this public option is what Medicaid is but he is mistaken. Medicaid is different. Medicaid is a government insurance plan. What is the difference in this situation is there would be no government subsidy to this public option and the public option entity, the insurance company, the not-for-profit insurance company, would have to negotiate arm's-length transactions, negotiate with doctors and hospitals on the rates they would be paid. There is no government mandate on the rates paid. That is not the case in Medicaid at all. So the analogy falls apart. When the Senator from Tennessee says public option is basically Medicaid, it is not. Medicaid is a government plan, public option is not a government plan. Medicaid has government command and control when it comes to the amount they are paying. This plan has to negotiate arm's-length transactions. It is totally different.

I might say a word about Medicaid. I asked the Senator from Tennessee, earlier this year because of the recession, President Obama said: We think the States are in trouble. We think the governments are in trouble. With the recession, fewer people are working, fewer people are paying taxes, and the demand for government services is going up. So we need to help them. We came up with \$80 billion, \$85 billion to send back to the States in a rescue fund so they could get through this recession. Unfortunately, we didn't have the support from the other side of the aisle. So when the Senator from Tennessee comes in and says these governments are facing hard times, it is true

they are, but the times would have been much harder for these governments without President Obama's stimulus package, which tried to help these States get through this rough period.

In the stimulus bill, the State of Tennessee received almost \$760 million in FMAP, which is basically Medicaid payments. There are only three Republican Senators who voted for it, not including the Senator from Tennessee. So when we tried to help the States deal with the expenses they face, many of those who are coming to the floor today did not vote for it. I think that needs to be part of the record.

Let me also say the costs are going up for health care in general, and that affects the cost of Medicaid. Medicaid is for the poorest people in America. Medicaid, by and large, when it comes to those under the age of 65, covers children. These are the children of poor families. The only compensation to the doctors and hospitals when they show up, if there is any, comes from Medicaid.

Also, it covers those who are elderly and very poor. You find some of them living in nursing homes across America. They have lost everything. They have nothing left. They have their Medicare and the help of Medicaid.

The argument that Medicaid is a bad system and poor system—it is easy to criticize that system, and it should be improved. What would we do without it? What would happen to these elderly people who have nowhere to turn and no savings, who are living the last months and years of their lives because of Medicare and Medicaid?

The States, of course, say the Federal Government should give them more money for Medicaid. I wish we could. In my State, incidentally, it is about a 50-50 split in Medicaid. For every dollar in Medicaid, 50 cents comes from the Federal Government and 50 cents from the State government. Other States are more generous with more money coming in.

The fact is, I know it is tough on governments to keep up with the expenses. What is the alternative? Is the alternative to ignore any health care for poor people? They will still get sick. As sick as they turn out to be, they will still show up at the hospital, and in our compassion we will treat them and the cure will be paid for by everybody else who has health insurance.

I might also say I believe the opt-out provision, which is being discussed as part of our approach, says we are going to create these public options, these not-for-profit health insurance companies in States across the Nation. But if a State decides through its Governor and its legislature they don't want to be part of it, they can opt out of the system.

I cannot think of a fairer approach. It will be tough for some States to do that because the public sentiment is pretty strong, almost 2 to 1 in favor of a public option. People understand

they want to have a low-cost alternative and not be stuck with the premiums the private health insurance companies decide to charge.

So I say in response to my colleague from Tennessee, whom I respect and call a friend, I don't believe characterizing the public option as the same as Medicaid is a fair characterization, and I don't think opt out is an unfair approach. I think there is fairness to it, allowing each State to make the decision what it will do based on the needs of the people who live in that State, and the people in the State will have the final say at the next election as to whether the legislature and the Governor made the best choice.

EXTENDING UNEMPLOYMENT INSURANCE

Mr. DURBIN. Mr. President, it has been 18 days since the Senate Democrats tried to pass a strong unemployment insurance extension only to see the bill blocked by the other side of the aisle. Since that time, over 125,000 Americans trying to find work have lost their unemployment benefits; 125,000 families across America now have the hardest possible question to answer: How are we going to keep food on the table? How are we going to keep a roof over the heads of myself and my family? Unfortunately, we have been unable to move an extension of unemployment benefits on the floor of the Senate.

This is unusual because in times gone by, this was never even controversial. Extending unemployment benefits was expected. If the economy was in recession and jobs were lost, we stepped up, both parties, and said: We can debate a lot of things, but let's understand there are a lot of Americans in very difficult circumstances who need a helping hand. That is not this time. Unfortunately, at this point in time, it has become a politically controversial issue about whether to extend unemployment benefits to people.

I have heard from a lot of people back in Illinois. A week ago in Chicago, I met with a room full of unemployed people and talked with them about their expenses first hand—people who have been out of work for long periods of time and are desperate to find a job. These people were all in training to improve their skills to get a better chance at employment. They told me about losing their health insurance. They worry about losing their homes. They are depleting their savings. They don't know which way to turn.

That is the reality. Any image anyone has of people on unemployment enjoying it and lazily waiting for the next check I think would be completely obviated by a visit with people who are unemployed.

I hope all my colleagues on both sides of the aisle will sit down with these families who are asking us for unemployment benefits.

A 50-year-old woman in Machesney Park wrote me recently:

I have worked steadily since I was 16. I am now 51 and have only had to collect unemployment once in those 35 years. I received my last unemployment check the first week in September [of this year]. I [look for] work every day. If I could just find a part-time job at 25 to 35 hours a week, I could get by. . . .

[Our families] have exhausted our retirement accounts just to keep [paying the bills]. Now we fear not being able to survive when retirement comes. So I do want to thank you and wish to stress the urgency in getting this bill passed. Do not give up on us hard-working American citizens.

A wife and mother in Fox River Grove wrote me and said:

I am a 59-year-old educated woman who lost my job in April 2008. I was just informed that my unemployment benefits will run out in [30 days]. I have been actively looking all this time but there is little out there for me.

I can't believe that people are going to be turned away for benefits when there is nothing out there for us to do. . . .

After years of working, putting two kids through college (MBA and [another master's degree]), we thought at last we could save for our retirement. I guess now keeping our house should be [a higher priority]. My 94-year-old mother has moved in with us because she lost her house so we are trying to [help her get along].

Please convince Congress to extend unemployment [benefits] until we can see a light at the end of the unemployment tunnel.

A young lady from Chicago wrote me:

I have been out of work since January 2009. I am currently collecting unemployment benefits, but am nearing the end [of eligibility for benefits].

I don't have crazy outstanding bills, actually, I have no debt other than a \$300 credit card that has fallen into arrears. I'm just trying to get by living in the city of Chicago. I have \$12.58 in my checking account and \$5.81 in my savings account.

I don't have a mortgage. I don't eat out. I don't even have cable. No kids in school. No health club membership. I also don't have insurance. I know you're working on that for us now, and I appreciate that. But this unemployment bill needs to pass quickly because as I understand it, 20,000 Illinois residents will lose their benefits in the next few months and I am one of [them].

I spend 10 [or more] hours a day dividing my time between job searching and trying to drum up business for a small business I am trying to get started. . . .

Senator, please, please, please pass this bill. If not for me whose credit has been ruined by nonpayment of a \$300 bill, then for the 20,000 other Illinois residents who have much larger bills, mortgages and families counting on them.

How are we supposed to justify to the people we represent across America that we cannot take up and pass this extension of unemployment benefits? These unemployment benefits are paid from a fund that is collected from workers and their employers during the course of their work career. We put a little bit of money away each week on the chance that someone facing unemployment will need that money to get by.

These people are asking for an extension of their benefits from a fund into which they paid. It is deeply troubling to me that we can't help these people and thousands like them.

The Senator from Kentucky, Mr. McCONNELL, the Republican leader,

came earlier and said the reason we can't do this is because we need to consider a few amendments to it.

Last week, the No. 2 man in the Republican leadership, Senator Jon Kyl of Arizona, said his side, the Republican side, wanted amendments to the unemployment compensation bill on "stuff that pertains to the subject—how do you pay for it, for example."

I will tell you that the list of amendments given to us to add to the unemployment bill go far beyond what the Senator from Arizona said. For example, there is a group of Senators over there who want to get into a debate about immigration. This is an important issue, don't get me wrong, and it is one we should take up and will take up, probably not this year but the beginning of next year. But to hold up unemployment benefits for these hard-working Americans whose citizenship has never been questioned so we can debate immigration? I don't believe that meets the test Senator KYL said we had to meet: that he would want amendments that pertain "to the subject—how you pay for it, for example."

Secondly, the Senator from Louisiana wants to offer an amendment about an organization called ACORN. You remember ACORN. Those are the folks who were caught on the videotapes counseling people on conduct that if it is not criminal should be criminal. Those employees of ACORN have been dismissed. I am sure they are being investigated, and they should be. What we saw on those tapes is not only troubling but could be actionable. I am not saying hold back at all with regard to ACORN.

In response to that, I offered an amendment calling for the GAO to do an investigation of all the Federal expenditures related to this agency. I want to find out if there is any other wrongdoing, whether we should cancel work that is being done, investigate payments that are being made. I want to get to the bottom of this. The House went further to cut off ACORN from any business with the Federal Government. They voted for that.

So to say this organization has been ignored is wrong. There is a lot that has been said and done about ACORN. The Obama administration cut them off on work on the census, and they are investigating their work in a lot of other areas. But to hold up this bill on unemployment benefits so we can again debate ACORN, how do you explain that to people in Louisiana and Illinois, folks who have lost their unemployment benefits? You have to say: Just hang on. We sure would like to send a check to take care of your family, but first we have to revisit the ACORN debate and go through all this all over again at some new level.

That, to me, is irresponsible. It is wrong for us to deny basic benefits that people need when they are out of work so that people can come to the floor of the Senate and argue about issues that have nothing to do with

these poor unemployed people and the struggles they are going through.

There are literally six unemployed people in America for every open job. It is no wonder they are having a hard time finding employment. It is starting to turn around ever so slightly, and I hope it turns around quickly. That is the reality.

In the meantime, could we not come to agreement, Democrats and Republicans, that this safety net is critically important; that the people affected by it couldn't care less what our party labels are, couldn't care less about another debate about ACORN? All they want to do is get by another day, week, or month in the hope they can find that job.

Time and again the Democratic leader has offered our Republican friends an alternative coming forward: doing this bill, passing it quickly, and sending it out so we can extend up to 20 weeks coverage of unemployment benefits in some of the States hit hardest by unemployment. But time and again the Republicans on the other side of the aisle have said no, as they have on so many other issues.

They don't have an alternative to paying unemployment benefits. They know we have to do it. We should do it. But they want to debate other issues. They don't have an alternative to health care reform. They don't like what we are proposing, but they don't have an alternative. They basically want to stay with the current system in America, which is not good for us in the long run.

What we need is more positive efforts toward cooperation, and I hope we will achieve it. For the people and families in Illinois, they have my assurance that I will continue to work to extend unemployment benefits so more and more Americans, not only in my State but across the Nation, will have the peace of mind knowing they can get through this tough recession.

Mr. President, I yield the floor and suggest the absence of a quorum.

The ACTING PRESIDENT pro tempore. The clerk will call the roll.

The assistant legislative clerk proceeded to call the roll.

Mr. CORNYN. I ask unanimous consent that the order for the quorum call be rescinded.

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

Mr. CORNYN. I ask unanimous consent to speak for up to 15 minutes.

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

THE PUBLIC OPTION

Mr. CORNYN. Mr. President, I listened to the majority leader, Senator REID, talk about his melded bill, the combination of the Finance Committee bill and the HELP Committee bill that he has now completed merging behind closed doors. He said he is going to

send it to the Congressional Budget Office to get a score or a cost estimate. My hope is we will all be able to see it soon. We have not been able to participate in the process since it has been a process taking place between the majority leader and presumably Senators DODD and BAUCUS, the chairmen of the two committees, without Republicans being present. So we don't know what is in it, and we don't know how much it costs. Certainly those are two critical questions the American people are asking and those of us who will be required to vote on this legislation at some point would like the answers to. When will we be able to see it? When will the American people be able to see it? How much will the bill cost?

Today, I wish to focus on another question: Why is it that some people in this country think another government-run health care plan is the answer? A government-run plan goes by a lot of different names. It is an attempt, in part, to obfuscate what people are trying to do. Sometimes people like to call it the public option because it sounds innocuous. Who could be against a choice, an option, if it is not mandatory? Others say they are not for a public option unless it has a trigger. Others talk about opting in, and we heard the majority leader talk about a bill he intends to introduce that provides an opt out for the States. The reality remains the same. We are talking about a brandnew entitlement program, a brandnew government-run health care program run out of Washington, DC, based on the fundamental and misguided belief that one size fits all for a nation of 300 million people.

Some of my colleagues believe a government plan is gaining momentum. I appeared yesterday on a Sunday television show with Senator SCHUMER, the distinguished Senator from New York, who said he thought Congress was right on the cusp of a public option or government-run plan. The more the American people find out about what is meant by the public option, the less they like it.

Last week, we saw the Washington Post-ABC News poll that supposedly said that support for a government-run plan was growing. In fact, support has fallen by 5 points since June. These numbers can be misleading. As the Presiding Officer knows, in politics and public opinion polling, he or she who gets to ask the questions or frame the questions, he or she who gets to decide what the sample is can have a dramatic impact on the answers given to a poll. It is absolutely the case that support for the so-called public option drops dramatically when we explain to people what it would actually do.

ABC News polling director Gary Langer wrote about this dynamic in June. He noted that while 62 percent initially favored a so-called public option, that number dropped from 62 percent to 37 percent once it was explained to people that it would put many private insurers out of business because

they couldn't compete with the Federal Government and the so-called government plan.

In other words, support dropped when people realized they would not be able to keep what they have now—which is one of the President's promises—because many insurers would simply be driven out of business. Thus that promise President Obama has made time and time again would not be possible under the public option or government plan.

Today in the Washington Post, Fred Hiatt explained why a government plan would end up breaking President Obama's promise: A government plan would work like Medicare and Medicaid—those are two government plans—and they would, as Medicare and Medicaid do, pay providers at low rates.

As a matter of fact, last week we had a vote on a bill—actually, on a cloture motion on a motion to proceed—a technical vote but one that would have taken us to a bill to basically reverse the cuts in Medicare reimbursement rates to Medicare providers. But it was not paid for. It would have added \$300 billion to the national debt. So 13 Democrats joined with Republicans to defeat that. Hopefully, we will go back to the drawing board and come up with a bill that will be paid for.

But the point is, any new government plan, as Fred Hiatt pointed out, would work like Medicare and Medicaid and pay providers much less than they could get under private insurers. So providers would, as they do now, make up the difference by charging private plans more for the same services. This is a so-called cost-shifting phenomenon. Then private insurance premiums—if you have private coverage now—would increase for people who have health insurance coverage now. Ultimately, some of them would be forced to drop their private insurance because it would be more expensive, not less, which is what I thought the object of this exercise was about: how to bring down costs, not how to drive them up, and the cycle would continue until all private insurers would go out of business, and all Americans would find themselves on a single-payer, government-run health care plan. So much for the option in the public option.

So the fact is, the government plan would not be just a competitor; it would, in fact, act as a predator by calling the shots. Even as it takes the field, the government plan would undercut the private market and create another Washington monopoly.

Some people have described the so-called public option as a Trojan horse. I have used that phrase myself. But the person who actually devised the public option said this—his name is Jacob Hacker, and he is a professor at Berkeley—he put it this way last year:

Someone once said to me, "This is a Trojan horse for single payer," and I said, "Well, it's not a Trojan horse, right? It's just right there."

Professor Hacker said:

I'm telling you, we're going to get there, over time, slowly.

The truth is, we should not be creating another government plan when the ones we have now are not working very well at all.

As Robert Samuelson wrote in today's Washington Post:

Why would a plan tied to Medicare control health [care] spending, when Medicare hasn't?

He noted that from 1970 until 2007, Medicare spending had risen by 9.2 percent annually. Let me say that again. From 1970 to 2007, Medicare spending had risen by 9.2 percent annually. He says this is just one reason the so-called public option is what he called a "mirage."

We know there are current entitlement programs that have major unfunded liabilities. Medicare has a \$38 trillion unfunded liability and will effectively go bankrupt in 2017. Yet this bill, at least the Finance Committee bill—I presume the bill coming out of Senator REID's office will do the same—takes \$500 billion from Medicare to create a new entitlement plan, a new government-run health care plan, when Medicare itself has \$38 trillion in unfunded liabilities. It just does not seem to make any sense.

Medicaid, which, of course, primarily helps pay health care costs for the poor, reduces access to health care in many communities because reimbursement rates are so low that many providers simply cannot take new patients. As "60 Minutes" reported just last night, fraud and abuse in government health care programs cost taxpayers about \$90 billion a year. Does this sound like a model we want to hold out—a new government-run plan—when the ones we have now are broken and need fixing?

On the Medicare fraud and abuse, according to FBI special agent Brian Waterman, Medicare fraud is a bigger problem in South Florida than the drug trade. He said:

There are entire groups and entire organizations of people that are dedicated to nothing but committing fraud, finding a better way to steal from Medicare.

One former Federal judge looked at his Medicare statement and found that someone had billed the government for two artificial limbs on his behalf even though he still has the ones God gave him. In other words, he did not need any artificial limbs, but somebody charged them to Medicare on his bill without his knowledge.

I agree with our colleague, Senator LANDRIEU from Louisiana, that a government plan would just replicate the same kinds of problems we have seen in Medicare and Medicaid. As she said:

Why don't we fix the two public options we have now instead of creating a [new] one?

Well, supporters of a government plan say we need to have more competition and give consumers more choice. I could not agree more. But this

is not—this is not—the way to do it. Competition occurs when we have more private insurance companies competing in marketplaces, which would happen under some proposals made by our side of the aisle—if we would simply create a system where individuals could buy health insurance in any State across the Nation and were not just confined to buying health insurance in their own State. Competition increases when we get more insurance carriers to enter the market, not by creating a government plan that will drive them out of it.

We have proposed ways, as I have said, to increase the number of private insurance options in every State. We think if that is the goal, certainly we ought to be able to come together in a bipartisan way to accomplish that goal. But I do not know why in the world we would settle for a health care proposal that would ultimately drive people to a single-payer, government-run health care plan, would raise taxes on the middle class, raise premiums on those who have insurance now and depress the wages of those who have that health insurance now, and would cut, as I mentioned a moment ago, \$500 billion from a Medicare Program that is scheduled to go bankrupt in 2017. Why would we settle for something that would make things worse instead of better for more than 100 million Americans? Why would we vote to spend \$1 trillion or more on a new entitlement program without fixing the ones we have now?

Well, it is not just me saying that this so-called public option with the opt-out—the majority leader has now proposed—which he admits does not have 60 votes, and the one Republican, Senator SNOWE, who said she would vote for the bill said she would not vote for a bill with a public option. So I am not sure why, with one Republican supporting the Finance Committee bill, they have now apparently rejected Senator SNOWE's support and opted for a strictly partisan proposal coming out of Senator REID's conference room.

But I also checked, and another health care expert whom I respect shares some of my views about the dangers of the so-called public option.

Secretary Mike Leavitt, who is the former Secretary of the Department of Health and Human Services, said:

Advocates for a public health-care plan continue to look for a way to give political cover to moderates while advancing their goal of implementing a government-run health-care system.

He said:

[Ultimately,] it is designed to undercut private insurance.

He said it is “dangerous for three reasons.” He said:

One, it would be cheaper for employers to stop offering private [coverage to their employees and to] funnel their employees into the government-run plan. Employers, not employees, would get to make that choice.

Secondly, he said:

[A] government-run plan would use the coercive force of government to dictate the prices that [are going to be] charged by others—by doctors, nurses, and hospitals—in a way that private entities cannot.

Third, he said this proposal is dangerous because a “government-run plan would be subsidized by American taxpayers, while private plans are not.” In other words, he says, if, in fact, States will be given a chance to opt out of the so-called public option, they would not have a chance to opt out of the tax dollars their taxpayers would spend in order to subsidize the so-called public plan.

As he concludes, he says:

The state “opt-in” is a transparently false choice. It is just another gimmick to try to find votes for an unwise policy that would increase the federal government's control over health care.

We can do better. We must do better. I urge my colleagues not to take the bait on this so-called public option, whether it has an opt-out or not, because it is just another disguised way to try to end up with a single-payer, government-run health care system out of Washington, DC.

Mr. President, I yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from Oklahoma.

Mr. INHOFE. Mr. President, first of all, let me say to my friend from Texas, the wake-up call is out there. People are fully aware of what is going on right now—the fact that you have a government option; you have a form of socialized medicine; you have something that has proven not to work in areas such as Canada and Great Britain and elsewhere. It is kind of interesting to me that we see those countries trying to emulate something we are doing at the same time we are edging over in their direction. I do not think that is going to work.

CAP-AND-TRADE

Mr. INHOFE. Mr. President, I will tell you something else I do not think is going to work. During the August recess, people were upset mostly about—because it was the most visible issue at the time—the prospect of socialized medicine for America. But at the same time, as a close second, there was another issue that was very much of concern; that is, a cap-and-trade bill.

Just to refresh your memory, this goes all the way back almost 10 years when we had the Kyoto Treaty. That was back during the Clinton administration, and we were supposed to be ratifying the Kyoto Treaty, which would have been a big, massive cap-and-trade or tax increase. In fact, the analysis of that was done by the Wharton Econometric Survey, from the Wharton School of Economics.

The question put to them was, What would it cost if we ratified the Kyoto Treaty and lived by its emissions standards? The answer was it would be somewhere between \$300 billion and \$330 billion a year. I always go back,

when I am trying to figure out what that would mean to individual families, and I recall that the Clinton-Gore tax increase of 1993 was the largest tax increase in three decades, increasing marginal rates, capital gains, inheritance taxes, and all other taxes. That was a \$32 billion tax increase. So that would be 10 times larger. That was the Kyoto Treaty. We did not ratify it.

Then along came the McCain-Lieberman bill in 2003 and then again the McCain-Lieberman bill of 2005, and the same thing was true. Other universities' analyses came in and tried to determine what the cost would be. I remember MIT came in and did an analysis of those bills, and it was somewhere in excess of \$300 billion a year. Then along came the Warner-Lieberman bill—not the current Senator WARNER but the past Senator Warner—and that was essentially the same.

What I am saying is, it does not really matter whether we are talking about Waxman-Markey or what we are going to be voting on sometime in the near future, I would assume, that is going to be a form of Waxman-Markey. By the way, I say that because when several Senators were trying to get information to analyze what it is we are going to be starting to have hearings on tomorrow and then ultimately marking up, they said the bill is a lot like Waxman-Markey, so just go look at the analysis of Waxman-Markey. If you want to do that, at least we now know there is a target out there. We have something we can talk about.

While I have serious problems with EPA's analysis of Waxman-Markey and its 38-page “meta-analysis” of Kerry-Boxer—that is 38 pages of a 923-page bill—the latter is not entirely EPA's fault. It is a drive to ram the Kerry-Boxer bill through the legislative process before people really know what it is. Now we know what it is because it is essentially the same thing we had in the Waxman-Markey bill that went through the House of Representatives.

It is kind of interesting. This massive tax increase called the Waxman-Markey bill passed the House after very little debate because it came up—in fact, they finished it at 3 o'clock in the morning the day they voted on it, so people had not had a chance to read any of it. So it passed by 219 votes in the House of Representatives. That is barely a majority. It is one that was—interestingly enough, the last time they had a massive energy tax increase such as this, it was called the Btu tax of 1994. That passed the House by 219 votes, the same margin. Obviously, that was killed later on in the Senate, as I believe this will be.

I come to the floor now to talk about this because tomorrow we start hearings, exhaustive hearings, on Tuesday, Wednesday, and Thursday. They are not going to be talking about the specifics of the bill; it will just be more propaganda. The main thing we want to do is make sure everybody knows it

is going to be a very large tax increase. It wasn't long ago that Representative JOHN DINGELL, who is a Democrat from Michigan—he said it right. He said: Cap and trade is “a tax, and a great big tax at that.”

So we have something we know we are going to be faced with. We know we are going to have hearings. The question has to be asked: If we know there are not votes to pass it in the Senate, why are we having our hearings now? I would suggest to my colleagues we are having them because there is a big party that is going to take place in Copenhagen. Every year, the United Nations throws this party. You might ask: The United Nations? Yes, that is where it all started, the IPCC. It is going to take place in Copenhagen during the middle of December. I thought it was interesting last night when President Obama announced he probably was not going to be going to this party in Copenhagen because it didn't look as if they had the votes to pass something in the Senate.

So I would only say to get ready. We are going to have more of the same. We went through it back during Kyoto, 10 years ago, and since then with four bills on the Senate floor and we are going to be talking about it more and more.

I just came from my office. This is kind of interesting. This is a hat signed by the Young Farmers and Ranchers, which is tied to the American Farm Bureau or the Oklahoma Farm Bureau, in this case. It says: “Don't Cap Our Future.”

When you stop and think about what would happen to the farmers—I hate to even single out farmers or any other groups because it is going to be just as punishing to the entire manufacturing base. It was interesting the other day, when we asked the question of the newly appointed Director of the Environmental Protection Agency, Lisa Jackson, as to what would happen if we were to pass the bill in the Senate and it would become law, as did the Waxman-Markey bill, how much would it reduce CO₂ emissions. She said: Well, it wouldn't reduce them. Because if we act unilaterally in the United States, then things happen where—this isn't where the problem is. In fact, we know we would have a massive exodus of our manufacturing base to such countries as China, Mexico, India, and others.

But nonetheless, here are the farmers who are concerned about this because, if you look at the cost of fertilizer, one of the major ingredients there is natural gas, and you look at the cost of diesel and everything else, it is very serious.

Bob Stallman, the president of the American Farm Bureau, just the other day said:

Increased input costs will put our farmers and ranchers at a competitive disadvantage with producers in other countries that do not have similar greenhouse gas restrictions. Any loss of international markets or resulting loss of production in the United States

will encourage production overseas in countries where production methods may be less effective than in the United States.

In other words, we can do it more efficiently in the United States, but if we don't have the energy, we will not be able to do it.

So I think the farmers, of all the people who should be concerned and are concerned, the wake-up call is out there. They better be ready when they come up with allocations. The allocations will not be available to us during the next 3 days of hearings. The allocations are something that are held back in secret so they can go to different elements of the society and say: Well, you are going to have an allocation where you can be a winner. They tried this with the Wheat Growers of America early on during the Warner-Lieberman bill, and they actually endorsed the bill until they realized it was a fraud and withdrew their endorsement.

I think Senator KIT BOND said it well. They did a study in the State of Missouri, and the study found that the proposed cap-and-trade legislation will cost the average Missouri farmer an additional \$11,000 a year in 2020 and more than \$30,000 a year by 2050.

So let me say to Tyler and to all my friends at the Oklahoma Farm Bureau: I have your hat, and I will wear it with dignity all the way to Copenhagen to make sure this thing doesn't pass.

I yield the floor.

The PRESIDING OFFICER (Mrs. HAGAN). The Republican leader is recognized.

HEALTH CARE WEEK XV, DAY I

Mr. MCCONNELL. Madam President, as the debate over health care continues, I think it is important, once again, to remind the American people that every lawmaker in Washington recognizes the need for reform. Health care costs are rising at an unsustainable rate, and if we don't get these costs under control, we can't expect to maintain the quality of care or the access to care most Americans currently enjoy. This is the primary problem with our system, and it is the primary reason our Nation is so engaged in this debate.

One of the proposed solutions for increasing access is the expansion of Medicaid. This afternoon, some of my Republican colleagues have been discussing why we, and many others from across the political spectrum, believe this is a very bad idea. The proposal that is being considered would expand Medicaid to about 14 million new people by 2019, including nearly 250,000 in my own State of Kentucky. On its face, this seems like a potentially effective way to increase the ranks of the insured. The reality is, however, it would make current problems much worse.

First of all, Medicaid is already in serious trouble. Leaving aside its exploding costs, the program is increasingly unable to match doctors with patients

because a growing number of doctors refuse to see Medicaid patients. This is a serious problem already. It would be a far worse problem if the program is expanded to include millions more without any expansion in the number of doctors willing to see Medicaid patients.

So while the need to expand coverage is real, Medicaid is exactly the wrong program to choose as a foundation for achieving that goal. Senator ENZI, the ranking member of the Health Committee, put it best when he said:

Instead of trapping poor Americans in a substandard health care plan, we should be giving everyone more options to find the care they need. Senators get to choose between competing private plans; so should low-income Americans.

Another reason we shouldn't be looking to Medicaid as a solution to our problem is the States, which run the program, are begging us—begging us—not to. There is a simple reason why: The States simply don't have the money. The recession is hitting the States particularly hard, and expanding Medicaid would make their problems far worse. That is because, unlike the Federal Government in Washington, every State except one is either constitutionally or statutorily required to balance its budget. In other words, while lawmakers in Washington continue to ring up everything on the government credit card, States actually have to pay their bills at the end of the year. So if Washington tells them they have to expand Medicaid by \$1 billion, that is \$1 billion less they have for something else. For States, expanding Medicaid would almost certainly mean shrinking services or raising taxes in the middle of a recession.

It is easy to see why the bill writers would propose Medicaid as a solution. It is a lot easier for Washington to push its problems onto the States, but in the context of reforming health care, this makes no sense at all. Expanding Medicaid would worsen the quality of care for those who already have Medicaid, and new enrollees would be entering a system with even fewer doctors per capita than there already are. Additionally, States could very well be bankrupted by the additional cost imposed by Washington, and even if they weren't, there is no doubt services would be reduced.

This is why Governors of both parties are insisting Washington not use Medicaid as a vehicle for expanding health care. Here is a sample of what we have heard. Governor Rendell, Democrat of Pennsylvania, put it this way:

We just don't have the wherewithal to absorb it without some new revenue source.

Gov. Bill Richardson, Democrat of New Mexico, said:

We can't afford [it] and [it's] not acceptable.

Bill Bredesen, a Democrat of Tennessee, called the plan:

The mother of all unfunded mandates.

Ted Strickland, the Democratic Governor of Ohio, summed it up like this:

The States, with our financial challenges right now, are not in a position to accept additional Medicaid responsibilities.

Senators who have worked in State government also recognize the problem. That is why so many of them from both parties are expressing serious misgivings about forcing States to expand Medicaid. Take one example. Senator NELSON of Nebraska, the former Governor, has explicitly said he would not support the new mandate. As he put it:

I will not support saddling the states with further obligations . . . you can take me out of the governor's office, but you can't take the governor out of me.

Even Senators who haven't said they oppose the idea are acknowledging the problem by working behind the scenes to have their States exempted from the mandate or to have it softened, a tacit admission of what the rest of us are saying; that expanding Medicaid is bad for States and bad if the goal is better health care.

Republicans tried to keep the idea out of the final health care bill, but those attempts were rejected. It is a shame, since there are a good many ways to increase access without expanding Medicaid—ways that would lead to better care and which wouldn't harm States financially. Increasing competition would lower costs and enable those who are currently uninsured to get good private coverage, private coverage that would provide them with far greater access to the care they need than Medicaid would and which would help lower overall costs for everyone. We should look to these ideas rather than looking to Medicaid as a solution to our problems, especially since so many people from both parties are massing against the idea of expanding Medicaid.

It is not too late to seek common-sense solutions to the problem of access. All of us acknowledge the problem. Now is the time to come up with a solution that all of us—Republicans and Democrats alike—support.

I yield the floor.

The PRESIDING OFFICER. The Senator from Arizona.

HEALTH CARE REFORM

Mr. KYL. Madam President, first of all, let me associate myself with the remarks of the Republican leader just now. I came to the floor because I wanted to reflect a little bit on what the majority leader said a few moments ago at a press conference. He announced that as a result of the efforts of a couple weeks of discussions behind closed doors—namely, in his office—he and a few other Democrats in the Senate have decided on what will be in the health care reform legislation. That is the first matter I wished to discuss, briefly.

The American people were told by the President they would be a full participant in the development of the legislation. They would know what it says. They would all be on C-SPAN.

They would get to see everybody hash out all the details, and they would understand what the Senate was about to do. On the contrary, what has happened is, a small group of Senators on the Democratic side went behind closed doors in the Democratic leader's office, and they have been working now for many days to put together this piece of legislation. We still don't know exactly what it says, but the majority leader has described it very generally, and he has described one of the most contentious pieces. It will have government-run insurance, he assures us. Well, government-run insurance is a very controversial concept. Obviously, that is going to be the subject of a lot of debate. But the American people have a right to understand what this is all about, what it means.

I think the first thing I would like to do is to say that Republicans are going to stand for certain principles in the consideration of this legislation. The first thing is we are going to want to know what it says. The American people have a right to know what it says. So as we find out, little by little, as the majority leader trickles out details about what is in here—or maybe one of these days we will actually get a written copy and we can read it and understand what is in it—we will share that information with the American people.

They have a right to know what it says. They have a right to know what it costs. Obviously, one of the things that has to happen is that the Congressional Budget Office or CBO, which has this responsibility, needs to examine the legislation, do all of its cost estimates and revenue estimates, and tell us what they think it costs. The American people have a right to know because they are very concerned about passing on the costs of this legislation to the next generation—to our kids and grandkids.

That brings up the third thing: How much will this increase the deficit? Does anybody believe that a \$1 trillion health care bill is not going to increase the deficit? I don't know of anybody who doesn't believe that it is going to increase the deficit. But by how much? A week ago, we had the first vote on the health care debate, and it was on a bill to borrow \$247 billion in order to ensure that physicians fees would not be cut. I am all for paying physicians. We need to pay physicians. My personal view is we need to pay them more, not less. But this legislation should have been part of the health care reform debate, because it is part of the overall cost of Medicare—for example, how much we reimburse physicians to take care of Medicare patients. No, that was going to be inconvenient because it would actually result in creating a larger deficit and, therefore, adding to our national debt. So we take that piece out and try to run it through as a separate bill—and by “we” I mean the majority leader. And he got a rude surprise. All of the Republicans said, of course, no, we

should not do it that way, and 13 of his Democratic colleagues agreed. They cared about the deficit. They said: We don't want to add to the debt and, therefore, this is the wrong way to go about it. We need to find a better way.

Another question the American people need to have answered is not only how much will it cost but how much will it add to the deficit, and then how much will it add to the debt that our children and grandchildren will have to pay? Republicans believe that any legislation should provide protection to all patients, whether they be seniors on Medicare, folks relying on Medicaid, or people in the private sector. Nobody should interfere with their physician or get between them and their physician. That is a very sacred relationship—the doctor-patient relationship—and the government should not get in between that. But that is what government-run insurance is all about.

Republicans are going to insist on protection of the American people from a delay and denial of care. Why do we raise delay and denial of care? Throughout the legislation considered by the committee so far, there have been numerous provisions that will result in the delay and denial of care and, in the long run, rationing of health care. I have talked about that on the Senate floor. We will examine the legislation that has now come out from behind the majority leader's closed doors and see what kinds of protections they have built in. If it is not much different than the bills already considered, my guess is there won't be any protections. Republicans will have to again present better ideas, our alternatives, that include protections for patients from having their care delayed and denied to the point that it is even rationed.

Another thing Americans are going to want to insist on with this new spending is they are not going to pay for it indirectly in the form of higher taxes or premiums. I think No. 5 or 6 on my list is that Republicans will want to provide protections so that the increased costs of the legislation are not passed on to the American consumer in the form of higher taxes or in the form of higher premiums.

Why am I concerned about that? Because, again, the CBO, which examined the legislation before the committees already, has said that the costs imposed on the insurance companies and others in the form of higher taxes will be passed through to their customers, to the beneficiaries, in the form of higher premiums. It is inevitable that when you have these taxes imposed among competing companies, in order for them to stay in business, they are going to have to pass some of these taxes on, and they are going to pass some of the increased fees on, and they are going to pass on the premium increases that will be required for them to satisfy the various government mandates.

Another question is, exactly what are the government mandates here? What

are people going to be required to do that they don't have to do today? Most people have insurance today. It works for them and they don't want it interfered with. Under this legislation, every single American will be required under law to buy a product, an insurance product—not just any product, but the product defined by the Federal Government. If the government has the authority to make you buy something and has the authority to tell you what has to be in it, it also has the authority to tell the people who create that what they can and cannot put in their product. Sure enough, that is what they have done with the insurance companies. They have said to them that you all have to offer the exact value—four different kinds of policies; you have to offer at least the middle two, and you may offer the other two, but you cannot offer any less or any more, and they all have to have the same value, and we will mandate what they have to cover. Since we are going to have a “one policy includes everybody” product, the same insurance policy will have to provide the benefits I need, the benefits you need, the benefits the occupant of the chair needs, and the benefits the American people watching this need. Some of us are old, some are young, some are male, some are female, some have illness, and some don't. You have all kinds of conditions. If we can buy our own insurance, usually we can find a policy tailored to fit our needs, and it doesn't cost as much money because it doesn't cover as many things. When you have to have one policy that covers everything for everybody for any conceivable issue, you will have a huge policy with all kinds of things covered and with the concomitant costs—namely, costs that cover all of those things—meaning a premium. That is one of the reasons premiums will be increased.

I think another thing we are going to have to find out about this legislation is, does it do what the other bills do, which is cut Medicare? This is important, because we have made a promise to America's seniors, and a lot of us have a lot of seniors in our States. I certainly do in Arizona. We have made a promise to seniors that we will provide basic care in the form of Medicare. They will have to pay a certain amount and the government will pay a certain amount, and it will provide certain benefits. Well, the seniors have said: But we think maybe our benefits are going to be cut. The President, Senator BAUCUS, and others have said: No, no, don't worry, your benefits will not be cut. The people who tell you that are trying to scare you.

Let me quote a couple of things. Last week, a USA Today-Gallup poll showed that Americans overwhelmingly oppose cutting Medicare to pay for health care reform. Sixty-one percent of Americans oppose it—almost 2 to 1 in opposition to cutting Medicare in order to pay for health care reform.

How do we know it will cut benefits and that, therefore, seniors do have a

right and a reason to be concerned? Let's go again to the nonpartisan CBO. What does it say about the legislation that has been debated so far? It estimates that the cost of the most moderate bill—and there are five bills all told, and now we have a new one coming out of the leader's office we have not read yet. But of the five bills, the most moderate is the so-called Baucus bill. According to the CBO, it would cut Medicare by nearly $\frac{1}{2}$ trillion—about \$450 billion. What do these cuts go to?

Here are the specifics: \$162.4 billion in permanent reductions for most Medicare-covered services, such as services supplied by hospitals, nursing homes, and hospice. Those are real benefits; \$117.4 billion in cuts to private Medicare plans, known as Medicare Advantage. Well over 30 percent of the people on Medicare in Arizona have this Medicare Advantage-type plan. And \$32.5 billion in cuts to home health care. This is something a lot of people count on, and that is a significant cut. There will be \$22.3 billion in savings from a new Medicare commission that will propose automatic cuts. A lot of people laugh and say these commissions always propose cuts and Congress never ends up adopting them. That may well happen here. I know that one of two things will happen: Either we are not going to reduce expenses and we won't have enough money to pay for the new entitlement programs created by the legislation, because Congress won't follow the recommendations and adopt them, or it will and there will be real cuts in Medicare benefits. One of those things is true, and neither is a good result.

Here is what CBO said about Medicare benefits. Remember, \$117.4 billion is being cut from Medicare Advantage. CBO spoke to that. It confirms in writing, and also to the members of the Finance Committee when Dr. Elmendorf appeared before us, that the value of the extra benefits offered by Medicare Advantage will drop from \$135 per month to \$42 per month by 2019. It gradually goes down from \$135 to \$42 per month. What are these benefits? They include dental care, vision care, preventive screenings, chronic care management—a whole host of things that are important for America's seniors.

What is the annual value of the reduction in benefits per enrollee? It is only \$1,116. We are not cutting benefits for seniors? Only to the tune of \$1,116. We are cutting benefits, and seniors have a right to be concerned.

Those who argue that Republicans should not be pointing this out to seniors—those who want to muzzle or gag us from telling seniors this will happen I suggest should consult CBO and realize that what they are asking seniors to do is beyond what they should be required to do, which is to take these kinds of cuts for a new entitlement.

Let me share some comments from some of my constituents who have ac-

tually written to me about the kinds of cuts they will suffer under this legislation. I have gotten a lot of letters. I asked my staff to compile a few so that I could share with my colleagues where they are concerned about losing drug coverage, preventive care, and a decline in the overall quality of their care. This is what they talk about. They realize you cannot cut nearly $\frac{1}{2}$ trillion dollars and not cut care. That is what it is all about.

One patient wrote that the Medicare Advantage plan helps him afford the seven medications he takes every day. He said:

I have been on Medicare now for four years and . . . my Medicare Advantage plan is the best deal around for seniors. The benefits for my prescriptions are a lifesaver. I could not afford my prescriptions without my Medicare Advantage plan. Having numerous medical problems and taking over 7 prescriptions per day—that can add up.

Another senior wrote this, again, talking about the savings and preventive care that would be lost under the plans for Medicare Advantage:

Please do not cut Medicare Advantage. It provides me with so many savings on doctor visits and prescriptions, including preventive care and the Silver Sneakers fitness program.

Let me digress for a moment. We hear a lot of talk about trying to get people healthier, to take care of their own bodies, as it were, and to provide incentives for people to eat better, have a better diet, to lose weight, not to smoke, and to go to the gym and work out a little bit. When we have a program that incents seniors to do these kinds of things, we should be happy to support that program and cut it only after great consideration, if at all. I suggest that we don't cut it. This constituent talks about that kind of preventive care. He says:

I will be 77 in a few weeks. I have not had any major surgery or hospitalization (thank God) and go to the fitness center three or four times weekly—something I could not do if Medicare Advantage is cut. I urge you not to cut this very important aid to senior citizens.

Another Medicare Advantage patient wrote to explain how the extra benefits she gets help her. She said:

I have never written to anybody in Congress because I didn't feel it necessary. Now I do because of the threat to cut my Medicare Advantage Plan.

When I turned 65 three years ago, I opted for a Medicare Advantage plan. I have been well taken care of and truly like my Health Net Ruby 3 plan and want to continue on it. For a small amount of \$38 extra a month, I not only get dental coverage, but also vision and benefits for a fitness program. These extra benefits have been a great savings for me, and I do not want to have them taken away. Please do not vote for a cut to my Medicare Advantage plan. I want to keep my benefits.

One more letter. This one, I thought, was especially touching. It is from a gentleman whose wife has pulmonary fibrosis and relies on Medicare Advantage for her treatments. They worry that the quality of her treatments will

decline if Medicare Advantage is cut, as proposed by this legislation.

Here is what he said:

If we lose Medicare Advantage, we are in trouble. United Healthcare Secure Horizons has provided us with great doctors that understand the disease. . . . It would be disastrous if she got a lung infection and had to go on a bureaucratic waiting list rather than being able to call our primary doctor as we do now. Please do not let them cut this great program.

The reason I quoted that letter is because another one of the things that is touted as a way to bend the cost curve and provide better care in the process is to coordinate the care from the primary physician right on through to any specialists and, Heaven forbid, if an individual has to go into a hospital, have surgery, or even have posthospital care in some kind of a facility. One can see how that kind of continued or coordinated care could be a real advantage to people and also end up saving money in the long term for the individual, for the insurance company that may take care of them, or the U.S. Government if we are paying for it as we do under Medicare Advantage, for example.

So here is a woman who talks about the fact that this kind of plan has been made available to her and why would we want to take it away. It has always been puzzling to me that because Medicare Advantage is actually administered by insurance companies, there seems to be something evil about it that a lot of our friends on the other side of the aisle would like to get rid of. They talk about having a government choice or a government option in their health care bill, but when it comes to options or choices for Medicare patients, they are not for that. They just want government only. They don't want the Medicare Advantage plan because it is actually administered by insurance companies.

What these companies do is provide a health maintenance organization-type of coverage where we have the continuum of care from the primary physician all the way through to whatever care may be required. This individual is talking about his wife being benefited by that kind of care. Why would we want to do away with that simply to save money so we can create a new entitlement? At the very time Americans are asking for better care, to ensure their care is not taken away from them, that is precisely what is being proposed by the other side.

Maybe I will be very surprised. Maybe we will finally have a chance to read the Reid bill or however the distinguished majority leader wishes to characterize it, and we will find they decided not to cut Medicare after all. If there are no Medicare cuts in the legislation, then I will be the first to come to the floor and say: Thank you. Thank you for not cutting seniors' Medicare. But if, in fact, as with the other bills that have been considered, this legislation ends up cutting Medicare anywhere from \$450 billion to \$500 billion,

then I think the concerns that have been expressed to me by my constituents need to be taken into account, and Republicans will insist on protection for our constituents. People should not have to go through the difficulties that are projected by these real people if this legislation ends up cutting their benefits.

We just talked about a few of the things. We have additional things we are going to talk about later on this week, about the tax increases and how the tax increases are going to be passed on to all Americans, even though they may, first of all, be levied against a device manufacturer.

For example, if you have heart surgery and there is a stint that is used in your treatment, that is a very sophisticated device. There is going to be a tax on that device. You are going to get taxed on that device. It may be placed on the device itself. It will be in your bill. When you look at your hospital bill, I guarantee you they are going to be passing it on to you.

There are other taxes. By the way, if you don't buy the insurance they require you to have, you are going to get a tax on that, too, administered by the friendly IRS, which raises a whole host of other problems. To have the Internal Revenue Service endorse a provision of this law is going to require a lot more folks down at the IRS to have the authority to look into your records and talk to your doctor and figure out whether you have bought insurance. If so, is it the right kind of insurance? Is it the kind of insurance the government says you have to have? If so, they will be happy to slap a tax on you, and you will have to pay for it. That is another tax you will be required to pay. There are others. As I said, we will talk about that later this week.

Then there are the premium increases. There was a real dispute about this issue. Folks said: We are not going to increase premiums after all. The whole exercise is to reduce the cost of health care, to cut premiums.

We said: That is a wonderful goal. We said: Let's see if you can come up with a goal that actually reduces health care premiums for people.

After all this time, it turns out they cannot do it. The Congressional Budget Office—again, the nonpartisan group of accountants we in the Congress have hired to analyze the cost of all these things and the effect of them—concluded that under this legislation that has been considered in the committees, the cost of the legislation, the cost of insurance is going to go up for the average family, not go down, compared to what it is costing them today.

There have been numerous studies on this issue. One of the studies broke it down by States and by region. They said the overall national increase, by the way, would be about \$3,300 per year increase cost in premium. Think about that. We are sporting a bill, the idea of which is to make health care less costly, but our insurance premiums are

going to go up \$3,300 and our taxes are going to go up. Do you know the reason? You cannot spend \$1 trillion and add a whole lot more people to the rolls and not have it cost more money, and it will cost more money. Should it?

I think we can achieve these objectives, as I have said many times from this podium, with targeted solutions to the specific problems that exist without increasing taxes or premiums. We have demonstrated how we can do that. The study I spoke of, though, said in certain States, such as the State of Arizona from which I come, the cost is going to be far greater than \$3,300. In fact, it is going to be, I believe it was some \$7,400 per family per year increase. That is astounding. That is as much money as some people pay for their insurance to begin with.

This study demonstrated that the increases could be as much as 95 percent. I guess that makes sense. If it costs \$8,000 for a policy today, and it is going to be increased by \$7,400, that is almost a 100-percent increase. It is incredible we would think about doing that on the American people. Yet that is the result of this absolutely nonpartisan study that was done by an entity that looked into all the different factors. They didn't cherry-pick the information. I know there was another group that was criticized because the insurance industry had hired them. That is not the study of which I speak. I am talking about the Oliver Wyman study.

There are so many things about this legislation we are going to need to know and that the American people are going to need to know. We are going to have to have plenty of opportunity to both read the bill and know how much it costs. Then we need to know how much it puts us in debt.

If the answer is it is not going to put us in any more debt or create a big deficit, we will just keep raising taxes until we have enough money to take care of it, that is not the answer either. It is not the way to get out of a recession, it is not the way to help hard-working families, and it is not the way to treat people we are trying to help by reducing their health care costs.

I hope as the next several days unfold, we will be able to read this product, this bill that was written in the majority leader's office. Maybe we will be surprised that it does not raise taxes, that it does not raise premiums, that it does not reduce care or ration care, that it does not cut Medicare. But I am not going to hold my breath. My guess is it will do all of those things, and when the American people confirm that is the result of this so-called health care reform, I am not going to blame them for saying: Absolutely not. We want no part of reform if that is what you are talking about.

I am reminded of a line. I haven't tracked down where it is, so I will not attribute it. I thought it came from Charles Dickens' "A Tale of Two Cities."

There was a character, Madame Defarge, who may have said this.

Again, the question of the French Revolution was on their minds. This person said: "Reform? Sir, don't talk of reform. Things are bad enough already."

That is apropos to this health care debate. We have costs going up right now. We don't need them to go up any more.

As another wag put it: You think health care is expensive now, wait until it is free. We all know there is no such thing as a free lunch. The money has to come from somewhere. As it turns out, in these bills, it is going to come from seniors, people who have private insurance and subsidize those on government insurance, and it is going to come from all taxpayers, including those who make less than \$200,000 a year, who the President said would not be taxed. A large percentage of the money, I think 87 percent in one case, will come from people making less than \$100,000 per year. Some of the tax provisions specifically impact primarily people who make less than \$50,000 a year. Health care reform should be about making it better for the American people, not making it worse.

It is going to be very interesting when we finally have an opportunity to review the legislation that was created behind closed doors to see whether it is going to pass these tests. We want to read it. We want to know how much it costs. We want to know that it is not going to add to the deficit or the debt. We are going to want to know that it will not result in the delay and denial of our care. In effect, we are going to want to know that the protections that are important for our constituents are in place.

I think there are some better ways to do this. Again, we will talk about those another day. We have already talked about them.

In the event you are saying, what kind of ideas are the Republicans talking about, I will mention one and stand down here.

We have been talking a lot about health care premiums and health care costs because doctors have to practice defensive medicine because if they are not careful, if they do not order a lot of tests, send their patients to a lot of different specialists, they are liable to get sued for malpractice. With this jackpot justice system we have, it costs a lot of money. The defensive medicine some have said can amount to \$100 billion or well over \$100 billion a year. There are two studies that put it over \$200 billion a year. Another study said just the cost of malpractice insurance premiums for doctors represents 10 cents on every health care dollar spent.

If we could reform medical malpractice laws, we could not only make the delivery of health care less expensive, we could make it less difficult for physicians to do what they consider to be the right thing without fear of getting sued, and we could dramatically reduce the cost of health care pre-

miums. This is a way to solve three problems that need to be solved, not cost a dime and, in fact, generate a huge amount of savings.

Why wouldn't we want to do this? As former Governor Dean of Vermont, former chairman of the Democratic National Committee, said on August 17 of this year at a townhall meeting in Virginia: The reason we haven't tackled medical liability reform is that we don't want to take on the trial lawyers.

I understand that. He is right. The Democratic majority did not want to take on the trial lawyers. But that is exactly what is wrong with Washington today.

We know what the problems are, we know what a lot of the fixes are, but we wouldn't want to take on the special interests such as the trial lawyers because that would not be good for us politically.

Republicans are saying: Yes, we do. It is time to take on those special interests. It is time to focus solutions on specific problems rather than trying to reform the entire health care system, including with a big government-run insurance company, in order to solve a problem that can be solved in a less intrusive way, less government intervention, less government expenditure, more private freedom, more money left in our pockets, and a greater assurance at the end of the day that we are going to continue to receive high-quality health care and not have it denied to us because of someone sitting in Washington, DC.

I urge my colleagues, as the days go forward, not only to review this legislation for themselves but to share those results with our constituents. They are the people for whom we work. They are the people we represent. They need to know what is in it. They need to know how much it will cost. They need to know it will not add to the deficit. They need to know it will not affect their health care. They need to know they will be protected and their benefits will not be cut, and they will be protected. It is up to us to provide that protection for them.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mr. SPECTER. Madam President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

HATE CRIMES

Mr. SPECTER. Madam President, I have sought recognition, briefly, to talk about the legislation on hate crimes, which was passed last Thursday as part of the Defense authorization bill, and to note the very different attitude which is present today than was present in 1997, when Senator Kennedy first took the lead in introducing hate crimes legislation, which I co-

sponsored with him at that time as well as Senators John Chaffee, James Jeffords and Alfonse D'Amato, the only Republicans who appeared on the bill at that time.

There was some substantial opposition, very little appreciation of the effort to expand hate crimes to include sexual orientation and also disability. Even the Washington Post had an editorial on November 17 raising questions about the wisdom of the legislation which we had introduced.

One of the concerns raised by the Post was that:

A victim of a biased-motivated stabbing is no more dead than someone stabbed during a mugging.

It seems to me, that missed the point. But even the Washington Post, at that time, challenged the rationale for expanding hate crimes. The Post also raised a comment about the disturbing aspect of the legislation is the lower threshold for Federal involvement, in any case.

Having had some experience as a district attorney, and knowing the practices of district attorneys having jurisdiction over a county—for example, my job was both the city and county of Philadelphia—that DAs do not have, in some areas, a very broad perspective.

Where the climate for a district attorney, an elected position, is not conducive to pursuing someone who has undertaken something which has a racial bias, a racial motivation or a motivation for a difference in sexual orientation, the cases are not brought.

That is precisely the kind of an area which warrants hate crimes legislation on the Federal level. But it has been a long battle, and the issue went through quite a few conferences. Thanks to the leadership of our distinguished majority leader, Senator HARRY REID, we have persisted. Senator REID has kept this issue front and center in the Senate, and Senator LEAHY, as chairman of the Judiciary Committee, and I in the past, in 2005–2006 in the 109th Congress, were pushing ahead on hate crimes legislation.

Senator LEVIN, as chairman of the Armed Services Committee, is to be commended for fighting it through and finally getting it through the conference. So it is quite a landmark move that the Congress has finally acted on it as we did last Thursday. There is a recognition that the Post was off base when it said:

A victim of bias-motivated stabbing is no more dead than someone stabbed during a mugging.

That suggests a misunderstanding of hate crimes, as Senator Kennedy and I wrote in an op-ed that:

Random street crimes don't provoke riots; hate crimes can and sometimes do.

A hate crime is broader than simply an attack against a victim, against the African American who was dragged through the streets in a small town in Texas which gave rise to the impetus for hate crimes legislation or the brutal attack on Matthew Shepherd in

Wyoming. So this legislation is highly significant.

I ask unanimous consent that the text of the Washington Post editorial of November 17, 1997, and the reply op-ed piece by Senator Kennedy and myself, dated December 1, 1997, be printed in the RECORD.

There being no objection, the material was ordered to be printed in the RECORD, as follows:

THE "HATE CRIME" PROBLEM

[From the Washington Post, Nov. 17, 1997]

Bill Clinton, at a White House conference last week, declared his support for a proposal by Sens. Edward Kennedy and Arlen Specter to broaden federal jurisdiction over that category of violence dubbed "hate crime." Federal law already permits judges to lengthen the sentences of defendants convicted of such crimes, defined as those in which a victim is targeted because of a particular identity. The Hate Crimes Prevention Act would go a step further than merely toughening sentences; it would significantly widen the Justice Department's latitude to prosecute local violent crimes that were motivated by bigotry. The bill is a can of worms.

The proposal is crafted as an amendment to a civil rights statute that makes it a crime to interfere violently with anyone's exercise of certain federally protected activities because of that person's race, religion or ethnicity. This law sometimes has enabled the federal government to prosecute violent civil rights abuses when state authorities were unable or unwilling to do so. The new proposal would add a section explicitly including sexual preference, gender and disability status within the law and allowing the government to prosecute bias-motivated attacks even when the victims are not engaged in a federally protected activity. It would open the door, proponents concede, for certain rapes and domestic violence cases to be prosecuted federally as hate crimes.

Folding sexual preference into the protection of the existing statute is clearly a good idea. The civil rights of gays and lesbians, after all, are sometimes targeted violently, and the federal government's anachronistic lack of authority to punish perpetrators of these assaults should be corrected. The disturbing aspect of the legislation is the lower threshold for federal involvement in any case. The government has an abiding interest in preventing attacks on the civil rights of its citizens. On the other hand, rape, murder and assault—no matter what prejudice motivates the perpetrator—are presumptively local matters in which the federal government should intervene only when it has a pressing interest. The fact that hatred lurks behind a violent incident is not, in our view, an adequate federal interest. The other conditions for federal involvement outlined in the proposal could prove too malleable to the Justice Department's desire to involve itself in a given case. We don't suggest that the proposal would lead to widespread federal involvement in routine criminal matters, but it is too permissive—and for the wrong reason.

The President's White House Conference on Hate Crimes, as it turned out, was less a discussion of these offenses than a kind of pep rally against the dreaded emotion itself.

That's fine as a bully-pulpit exercise, but the federal focus on what are called hate crimes must not wander too far from criminality. While the government has a simple obligation to protect us from crime, its relationship with hatred is necessarily more complicated. Government officials can denounce hatred and pass anti-discrimination laws, but when push comes to shove, most

expressions of ugly intolerance are protected by the First Amendment. Proponents of the new measure argue that a swastika painted on a synagogue has a deeper impact on a community than does a routine act of vandalism, and that's true as far as it goes. But the victim of a bias-motivated stabbing is no more dead than someone stabbed during a mugging. Ultimately, we prosecute crimes, not feelings. Guiding how people feel about one another is only marginally a law enforcement concern.

[From the Washington Post, Dec. 1, 1997]

WHEN COMBATING HATE SHOULD BE A FEDERAL FIGHT

(By Edward M. Kennedy and Arlen Specter)

The Post's Nov. 17 editorial criticizing the measure we have introduced on hate crimes reflects a misunderstanding of our proposal to close the gaps in federal law and a failure to recognize the profound impact of hate crimes.

Hate crimes are uniquely destructive and divisive because they injure not only the mediate victim, but the community and sometimes the nation. The Post's contention that a victim of a bias-motivated stabbing is no more dead than someone stabbed during a mugging suggests a distressing misunderstanding of hate crimes. Random street crimes don't provoke riots; hate crimes can and sometimes do.

The federal government has a role in dealing with these offenses. Although states and local governments have the principal responsibility for prosecuting hate crimes, there are exceptional circumstances in which it is appropriate for the federal government to prosecute such cases.

Hate crimes often are committed by individuals with ties to groups that operate across state lines. The Confederate Hammerskins are a skinhead group that began terrorizing minorities and Jews in Tennessee, Texas and Oklahoma a decade ago.

Federal law enforcement authorities are well situated to investigate and prosecute criminal activities by such groups, and the federal government has taken the lead in successfully prosecuting these skinheads.

Hate crimes disproportionately involve multiple offenders and multiple incidents and in such cases, overriding procedural considerations—including gaps in state laws—may justify federal prosecution.

In Lubbock, Tex., three white supremacists attempted to start a local race war in 1994 by shooting three African American victims, one fatally, in three separate incidents in 20 minutes. Under Texas law, each defendant would have been entitled to a separate trial in a state court, and each defendant also might have been entitled to a separate trial for each shooting. The result could have been at least three, and perhaps as many as nine trials, in the state courts, and the defendants, if convicted, would have been eligible for parole in 20 years. They faced a mandatory life sentence in federal court.

Federal and local prosecutors, working together, decided to deal with these crimes under federal laws. The defendants were tried together in federal court, convicted and are serving mandatory life sentences. The victims and their families were not forced to relive their nightmare in multiple trials.

Federal involvement in the prosecutions of hate crimes dates back to the Reconstruction Era following the Civil War. These laws were updated a generation ago in 1968, but they are no longer adequate to meet the current challenge. As a result, the federal government is waging the battle against hate crimes with one hand tied behind its back.

Current federal law covers crimes motivated by racial, religious or ethnic prejudice.

Our proposal adds violence motivated by prejudice against the sexual orientation, gender or disability of the victim. Our proposal also makes it easier for federal authorities to prosecute racial violence, in the same way that the Church Arson Prevention Act of 1996 helped federal prosecutors deal with the rash of racially motivated church arsons.

The suggestion in the editorial that our bill tramples First Amendment rights is ludicrous. Our proposal applies only to violent acts, not hostile words or threats. Nobody can seriously suggest that the neo-Nazis who murdered Fred Mangione in a Houston nightclub last year because they "wanted to get a fag" were engaged in a constitutionally protected freedom of speech.

In addition, hate-crimes prosecution under our bill must be approved by the attorney general or another high-ranking Justice Department official, not just by local federal prosecutors. This ensures federal restraint and that states will continue to take the lead in prosecuting hate crimes.

From 1990 through 1996, there were 37 federal hate crimes prosecutions nationwide under the law we are amending—fewer than six a year out of more than 10,000 hate crimes nationwide. Our bill should result in a modest increase in the number of federal prosecutions of hate crimes.

When Congress passed the Hate Crimes Statistics Act in 1990, we recognized the need to document the scope of hate crimes. We now know enough about the problem, and it is time to take the next step.

As the Lubbock prosecution shows, combating hate crimes is not exclusively a state or local challenge or a federal challenge. It is a challenge best addressed by federal, state and local authorities working together. Our proposal gives all prosecutors another tool in their anti-crime arsenal. The issue is tolerance, and the only losers under our proposal will be the bigots who seek to divide the country through violence.

Mr. SPECTER. An additional comment or two. We have seen times change with respect to don't ask, don't tell. When this was put into operation, it seemed to me at the time—and I have said repeatedly in the intervening decade-plus that don't ask, don't tell has been in effect—that it has outlived its usefulness, its utility. I do not know that it ever had utility, but, if so, it certainly ought to be changed now.

There are men and women, regardless of sexual orientation, who serve with bravery and distinction in the military. Don't ask, don't tell ought to be repealed. There are limits as to what the President may be able to do through an executive order. So where congressional action is warranted, let it be enacted.

On a somewhat similar tone, times have changed with the Defense of Marriage Act since it was enacted back in 1996. Now we have seen the States of Connecticut, Iowa, and Massachusetts have legalized same-sex marriage. It is an issue where attitudes have changed very considerably. I think, just as we were finally able to get hate crimes legislation through, just as it is time to move ahead and move beyond don't ask don't tell, it is time to repeal the Defense of Marriage Act.

In the absence of any other Senator right now seeking recognition, I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The bill clerk proceeded to call the roll.

Mr. HARKIN. I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

SMALL BUSINESS INSURANCE PREMIUM INCREASES

Mr. HARKIN. Madam President, yesterday I got a call from my friend and my colleague from Pennsylvania, Senator SPECTER. He said: Have you read the New York Times yet?

I said: Well, no, as a matter of fact I have not.

He said: Well, there was a front page story in the New York Times on Sunday about what was happening with small businesses, in terms of their insurance rates going up unduly, huge increases.

I said: Well, no, I have not read about it. I will get the paper and read it.

It struck a chord with me because somehow, over the last several weeks, I have gotten an influx of inquiries to me personally and also into my office from small businesses in Iowa, some elsewhere but mostly from my State, wondering what was happening to the huge increases in their premiums this year.

They have always been used to increases in premiums, but these seemed unduly large. Plus, a lot of copays and deductibles were going up. So I went out and got the newspaper and read the story in the New York Times that Senator SPECTER pointed out to me. It was alarming.

As I said, I thought about all the inquiries that had come into my office. I said: Something is going on out there. Something is going on out there. So we have this health care bill now, reform, that will be going down to CBO, I guess today, for scoring.

I wish to commend Senator REID for his leadership. I was actually in Pittsburgh today giving a lecture on disability policy at the University of Pittsburgh law school, with former Attorney General Dick Thornburgh, who had endowed the law school with an endowment. They have a very strong legal scholarship program dealing with disability law at the University of Pittsburgh law school.

So I rushed back from there so I could be on the floor with Senator SPECTER to talk about this a little bit because there is something very funny going on.

When I was in the airport, I saw Senator REID had said he was sending the bill down to CBO for scoring. I commend Senator REID for his leadership and for putting in a strong public option. I am told it is basically the public option the Senator from North Carolina worked so hard on in the committee to develop. I guess he married that up with the provisions from the

Finance Committee bill that would allow States to opt out by 2014. I commend Senator REID for putting that strong public option in the bill. The vast majority of the American people want that. They see it as necessary for trying to keep some control on cost and leaving more choice and more competition for policyholders.

As a matter of fact, this would be a great help to small businesses, because small businesses could go on the exchange, and they would have that public option also available to them. I have said many times: The two biggest winners I can see in the health reform bill are small businesses and the self-employed. Small businesses are at the end of the line. They have been whipsawed all over the place. They have no bargaining power. The same with the self-employed. This bill will turn the tables by providing the exchanges and providing more help for small businesses. They will be much better able to negotiate and to pick and choose among different policies rather than what they have now.

Now in many cases they get one or two, and that is about it in a lot of States, one or two different insurance companies. In the New York Times article, some suggest the insurance companies are raising their rates to generate as much revenue as possible before health reform obliges them to change the way they do business.

Isn't that interesting. They are anticipating health reform passing so they want to jack up their premiums as much as possible before that happens. Others assert the industry is responding to Wall Street's demands for ever higher profits in the health insurance industry, that Wall Street is putting pressure on them to increase profit margins.

Again, I always have to ask: Why are we doing health reform? Are we doing health reform to help the health insurance industry or are we doing health reform to help the American people? That had to be our first response, that we are here to help the American people, not to help the health insurance industry.

I have had many small businesses tell me how tough it has been. I have a small newspaper in Iowa with 12 employees. The owner Art Cullen recently turned 50. Their insurance premiums for his small business jumped by 58 percent in 1 year and more than 100 percent in 2 years. They have a \$5,000 deductible.

I asked Art: Why don't you get another company? He said: I can't. I only have one in this area that will offer insurance. So that is why we need the exchanges, why we need health reform, so that Art Cullen and his small business can join with other small businesses on these exchanges to get a better deal.

Mike Landeur owns a muffler shop. He has 10 employees. He offers insurance to them, but his premiums have jumped 66 percent in the last 3 years. His deductibles have gone from \$4,000

to \$16,000. Mike is expensive. He was born with a congenital heart disease, so he dropped himself from his company's policy. He is the owner, taking himself out of the pool. But he can't get any kind of individual insurance because of his preexisting condition. Now he is worried he will have to sell the small business, all because of excessive health insurance costs.

This is unconscionable. As we speak, the majority leader is sending his bill down to CBO. And make no mistake, the bill we are bringing to the floor will offer real solutions for small businesses. It will enable them to purchase insurance through an exchange so they can choose among multiple plans at lower costs than are now available in the small group market. Small businesses and the self-employed can go on the exchanges and, if they want, they also are eligible for the public option.

It will sharply reduce administrative overhead that drives up the cost of insurance through such practices and medical underwriting and preexisting condition exclusion clauses. We provide a new small business tax credit to make insurance more affordable for the most vulnerable small businesses. We make new investments in wellness and disease prevention for all businesses, including small businesses.

In addition, we will put a stop to the outrageous and unacceptable insurance industry practices that harm the ability of small employers to cover their workers. We will require that insurance companies document how much of each premium dollar is going for medical expenses. We will require that insurance companies document how much of each premium dollar goes for medical expenses, and we are going to require rebates for excessive overhead charges. We will end the broken status quo where insurance executives make tens of millions of dollars in salaries and bonuses while their small business customers go out of business because they can't afford health insurance. We will end the exceptional and unwarranted antitrust exemptions the industry has enjoyed without public benefit for far too long. We will end the ability of insurers to jack up premiums by as much as 160 percent, which is what they did for one small business, because they thought the group was "getting too old." Therefore, they jacked up their premiums by 160 percent.

I thank Senator SPECTER for having a keen eye and for giving me a heads up on this yesterday. There is something happening out there right now all over this country. Small businesses are being inundated with higher costs and huge increases in their insurance premiums. To America's small business community, we have a simple message: Help is on the way. We will get this health reform bill done, and we are going to help small businesses and the self-employed.

I hope they can hang on long enough so we can get this bill through, hopefully before the end of the year, so that

next year when their policies are up for renewal, we won't see these kinds of huge increases and gouging of small businesses.

We need reform. We always think about it in terms of individuals and how this affects individuals. But we also think about how it affects the majority of workers who work for small businesses who don't have the kind of large group power that maybe big businesses and bigger industries have. That is why this health reform bill is so important for everyone, but none more so than the small businesses and the self-employed.

I am hopeful, along with Senator SPECTER, that we can bring some more of this to light. I encourage anyone who has any evidence, stories, anything we can document of what the increases are to small businesses, please get them in to us. I have heard about enough of these to know it is not just a few here and there. It must be more widespread. We need those. Hopefully, we can shed more light on this as we move forward to bring the bill to the floor.

I thank my colleague for his leadership and for bringing this out. I look forward to working with him to try to help small businesses in Pennsylvania, Iowa, and everywhere else.

I yield the floor.

The PRESIDING OFFICER. The Senator from Pennsylvania.

Mr. SPECTER. Before commenting further on the article in the New York Times, some of the things the distinguished chairman of the HELP Committee has said, it would be my hope that we would proceed, as Senator HARKIN related. I got hold of him yesterday morning after noting the Sunday Times, and then we proceeded to talk about a hearing which I hope we can do promptly. One of the witnesses whom I would like to see called, subject to the approval of the chairman, is Walter Rowen of the Susquehanna Glass Company in Columbia, PA who sought to renew his company's coverage for 2,000 employees and found out that the premiums had gone up by 160 percent. I talked to Mr. Rowen this afternoon and got more of the details of his situation.

As Senator HARKIN has commented, this is typical of a great many. Right in the middle of where we are now on this debate on the public option, I believe the case for the public option, a robust public option, would be strengthened materially to document what the New York Times has said. Right now it is a newspaper article. It is a little different when there is a Senate hearing on the subject and you bring in people such as Walter Rowen who have demand for a 160-percent increase, and you question the insurance companies on what they are doing. If the New York Times is accurate, that small businesses will be asked to pay about a 15-percent increase for the next year—and this is substantially higher, and in a moment or two I will go

through some of the specific quotations—and that they are responding to Wall Street because Wall Street is demanding more profits from their investors—that is specified in the article, and I will take it up in detail—and the comment is that the insurance companies are more frightened about Wall Street than they are about Congress. I suppose that was surprising to me that in the context of the times, the way Congress is moving ahead on comprehensive health care reform, insurance reform, that they at this point should be more concerned about Wall Street than Congress. I think Wall Street ought to be more concerned about Congress than insurance companies. I think Congress is finally going to act on quite a number of the abuses in so many lives. But if we are seeing here action by Wall Street pressuring the insurance companies to raise their profits before Congress acts, then we ought to find out. If there is any justification for insurance companies to raise their premiums, let's have them tell us. Let's bring in the insurance companies.

There are a lot of these famous pictures of a half a dozen corporate executives standing in front of a congressional hearing room, raising their right hands and swearing to tell the truth. And then we have some questions for them. I have questions for them. Why the increase? Is there an increase because health care costs have gone up?

One of the experts quoted in the New York Times article says 23 percent. Mr. Rowen faces 160 percent. Is there any justification except profiteering and acting ahead of congressional action?

I hope Senator HARKIN will have the hearing promptly. It will bolster the case for the public option. It will bolster the case to have alternatives to the private sector. What is often misunderstood is that the public option does not eliminate the private sector. The public option is what it says. It is an option, another course, another thing one can choose. It is precisely this kind of response to Wall Street—and I will not prejudge it until we hear the witnesses and have them sworn in and take their testimony—if it is true, that reemphasizes the need to have some competition, to have competition which will not knuckle to Wall Street. A public option will not knuckle to Wall Street. We have talked informally. It is not easy to get a hearing organized fast, but Senator HARKIN and I, as is well known, passed the gavel on the chairmanship of the Subcommittee on Labor, Health and Human Services, and Education. We can proceed. I submit that now is the time to do so.

Mr. HARKIN. Madam President, I thank the Senator again for bringing this to light and urging us. I think we do need information. We do need to bring them in and check on what is happening with small business. We need to bring in some small businesses, some representatives of small businesses. I think we need to bring in

some of those insurance people, find out what is going on here. How come premiums are going up so much this year? I think we were in a recession, were we not?

Mr. SPECTER. Madam President, I have seen Senator HARKIN cross-examine, and it is a sight to see.

Mr. HARKIN. Madam President, I am not in the former prosecutor's league in that regard, I can say that. But we are working on that. As the Senator knows, sometimes it is tough to get these hearings put together. But hopefully we will have something we can pull together by next week.

Mr. SPECTER. Madam President, I thank the chairman for that statement. Next week would be about right because it would come right as we are considering this legislation. I think it would shed a lot of light on the legislation and be a big boost for the public option.

I thank my colleague.

Mr. HARKIN. I thank my friend from Pennsylvania.

Mr. SPECTER. Madam President, I refer to some of the specifics in the New York Times article. Again, I cite this as a newspaper article. It is hearsay in an article, but we will have the hearings to find out the facts. But this is what some of the details in the article say: that small businesses "are seeing premiums go up an average of about 15 percent for the coming year—double the rate of last year's increase"; big employers "have more negotiating clout." "[S]ome experts say they think the insurance industry" is "under pressure from Wall Street" to raise its "premiums to get ahead of any legislative changes that might reduce their profits."

Well, if that is so, we ought to find out about it. And if they have a justification for the price increases, let them tell us what it is. Let them produce their books and records if they have a justifiable basis for their increase.

The New York Times article goes on to point out that "Edward Kaplan, a consultant with the Segal Company, said his clients were seeing renewals for coverage at prices 15 to 23 percent higher this year," where "they typically faced increases" in the past "of 7 to 12 percent."

Joshua Miley, a consultant with HighRoads, which analyzes benefit information for employers, said the "undercurrent of health reform is driving part of the renewal increases."

The article goes on to point out:

There is no question that insurers are under pressure from Wall Street . . . they have heard from angry investors disappointed by the companies' earnings.

The article further states:

While the industry is particularly vulnerable now in Washington, she said—

"She," meaning Sheryl Skolnick, an analyst for Pali Capital, referring to the insurance companies—

"it seems like they're more afraid of Wall Street."

The article goes on to point out that:

In August, when Walter Rowen, who owns Susquehanna Glass [Company] in Columbia, Pa., sought to renew his company's coverage for two dozen employees, he said his insurer demanded a 160 percent rate increase.

I called Mr. Rowen today and found out that he has had a family business since 1910, and they have had health insurance for about 20 years, and they cover 50 percent of the premiums for their employees. As prices have risen, they have sought deductibles to lower the rate, and then they paid the deductibles for their employees. It is cheaper to have deductibles, have the company pay them, than to pay the increase in costs. That is another factor which we ought to analyze. That ought not to be so.

His policy expired in October—this month—and he corroborated the New York Times story that he was told there would be 160 percent more. He has found other insurance, but he is paying \$22,000 annually. He hires invariably in the 28 to 32 category for small business, and between 20 and 24 of them are covered. Now he has been forced to go to the point where the employees are going to have to pay the deductible. If they do not have an illness, then there is no problem. If they do, then the deductible is obviously very, very expensive.

I join my colleague, the senior Senator from Iowa, in congratulating the—now he is the junior Senator from Iowa, pardon me, but close—he has been here since the election of 1984, a long time. I join Senator HARKIN in congratulating the majority leader for moving ahead with a public option in the legislation which he has melded together. I again thank Senator HARKIN for his initiative and willingness to move ahead and have a hearing.

Madam President, I have an excellent floor statement which I will not take the time to read, prepared by my expert in the field, John Myers, which I ask unanimous consent that the full text of the statement be printed in the CONGRESSIONAL RECORD, and I ask that the full explanation which I am giving now be included. Sometimes the written statement just follows the oral extemporaneous statement and people reading the CONGRESSIONAL RECORD wonder why the Senator has repeated himself. Well, let it be understood what I have said is an extemporaneous statement, and this is the text prepared by my able staff assistant, and would ask that these comments be the preface to be included in the RECORD in full.

There being no objection, the material was ordered to be printed in the RECORD, as follows:

Mr. SPECTER. Mr. President, yesterday the New York Times ran a front page article describing the difficulties faced by small businesses in the face of rising health costs [Small Business Faces Sharp Rise in Costs of Health Care; October 25, 2009]. Small business is the backbone of our economy and in today's economy we must ensure that

small business has every opportunity to succeed.

The article highlights the plight of Walter Rowen, a constituent of mine. Mr. Rowen is the owner of Susquehanna Glass in Columbia, Pennsylvania. In August, when he sought to renew his company's coverage for his two dozen employees, his insurer demanded a 160 percent rate increase. He was told his work force was "getting too old and very expensive". He also found that any other health plan was likely to charge 30 to 50 percent more than he paid last year. Left with few options, Walter chose a less generous plan from a different carrier for 44 percent more.

Unfortunately, Mr. Rowen's story is not unique. Steep rises in insurance premiums are affecting small businesses across the nation. Small businesses are seeing renewal prices 15–23 percent higher compared to last year, according to Edward Kaplan, a benefits consultant with the Segal Company. As increases from 2008 to 2009 were considerably lower at 7–12 percent, it is hard to believe that a doubling of the rate of renewal costs in 1 year could be linked to medical costs alone. In the article Joshua Miley, a consultant who analyzes benefit information for employers, states that the undercurrent of health reform is driving part of the renewal increases. The idea that health insurance companies would increase rates to beneficiaries based on pending health care reform is disturbing. Michael A. Turpin, a former senior executive for United Health, and now a top official at USI holdings, an insurance brokerage firm, echoes Mr. Wiley's hypothesis: insurance companies are "under so much pressure to post earnings, they're going to make hay while the sun is shining."

Clearly the primary concern of health insurers is not whether their customers receive the best possible health care for their money; it is how much money can be generated for the insurers' investors. This objectionable action illustrates why there is a need for a public option as part of health care reform. Currently, there is a lack of competition in the health insurance market. Instead of individuals or businesses having the freedom to shop for coverage that works for them, they have to take what insurance companies offer. This translates to higher prices, preexisting condition exclusions and denials when insurance is most needed. A public option can help by introducing competition across the country. This plan could constrain costs and make the insurers think twice about passing down double-digit rate increases to customers.

The American people deserve a choice in health insurance to keep the private insurers honest. Without competition from a public plan, health insurance costs have skyrocketed. As health reform moves forward, I encourage Majority Leader REID to include a public option to bring affordability and competition back to the market.

A recent survey conducted by Intuit Inc. revealed that 44 percent of small business owners intended to hire new employees in the next year, an encouraging indicator in our economic recovery. This survey also noted that nearly 90 percent of those small business owners surveyed said that health insurance benefits are integral to attracting good workers. However, 58 percent of those small employers do not offer health insurance, with nearly 50 percent stating that they can't afford it. This is a sobering statistic and one we should do everything in our power to address.

I commend the efforts of Chairmen HARKIN and BAUCUS to combat this issue. Proposed health reform legislation will include a tax credit for small businesses that provide health insurance to their employees. The HELP Committee bill provides a tax credit for small businesses of up to \$2,000 for a family or \$1,000 for an individual. The legislation will allow small businesses to join health insurance exchanges so that they can group together and gain the same market power as larger companies currently enjoy. Currently, perhaps most importantly, small businesses pay up to 18 percent more than large employers. These exchanges will help relieve the problem of small risk pools, which due to their size can see their costs grow significantly if one employee suffers an illness such as cancer. By increasing the size of these risk pools, costs will become more predictable and more affordable for small businesses. Proposed legislation will also tighten insurance ratings to prevent costs from being disproportionately placed on older workers. This is of particular importance for small businesses that might employ older individuals, an important part of our Nation's workforce.

There is an undeniable need to address the health care problems we suffer from today. The inequities of the current system must be fixed, especially for the 70 million people that are employed by or operate a small business. The decisions of health insurers to drastically increase health insurance prices before health reform is enacted demonstrates the need to promptly move forward with legislation that includes a public option.

Mr. SPECTER. Madam President, I thank the Chair.

TRIBUTE TO ROZITA VILLANUEVA LEE

Mr. REID. Madam President, I rise today to honor Rozita Villanueva Lee for her many years of advocacy on behalf of the Nevada Asian American/Pacific Islander community. Asians and Pacific Islanders refer to her as the mother of their communities in southern Nevada. Lee started as a former special assistant to former Governors George Arioshi of Hawaii and Robert Miller of Nevada. She then began advocating for Nevada's Asian and Pacific Islanders. Her Hawaii Polynesian connection led to her being the producer of

"Drums of the Island," the longest running Polynesian show on the Las Vegas strip.

As cofounder of the Asian Pacific's Forum in 1993 in response to the growing Asian Pacific Islander population and their need for a voice and representation, she championed many causes to address the challenges faced by her community including social justice advocacy and political representation. She was often the first person called regarding issues of the APIA community in Las Vegas. Lee helped facilitate the reorganization of a dormant Pacific Asian Chamber to what is now the Las Vegas Asian Chamber of Commerce serving as its founding chairperson. She also served as chairperson for the Philippine American Youth Organization, PAYO, helping the younger generation of Filipino ancestry establish a voice and an avenue to learn more about their culture and heritage. She fulfilled all these roles while serving as the conduit for many organizations including the Hawaiian Civic Club, Japanese American Citizens League, Organization of Chinese Americans and National Federation of Filipino American Association. In addition, she empowered cultural organization and their leaders within the Korean, Thai, Vietnamese, Indian, Pakistani and other APIA ethnic communities.

Rozita has been politically active also. She was the president of the Women's Democratic Club of Clark County and was leading her fellow Democrats to help bring about change. As a result, President Obama turned Nevada blue by winning Clark County with 380,765 votes. Mrs. Lee championed the Asian American Studies Bill in the Nevada State Legislature which was instituted by the Clark County Commission and became law. She has been actively serving as the chairperson for the Asian Pacific American Labor Alliance—APALA—in southern Nevada and has been the prime mover of political activism with the APIA for more than a decade. She initiated the first outreach to establish an APIA voting block through education and voter registration and was the liaison between the Philippine Ambassador and the Senate on behalf of the Filipino World War II Veterans. It is clear that Rozita is a dedicated community activist.

Rozita Villanueva Lee was named on the most influential women in Las Vegas by the Women of Diversity, and one of 100 most influential Filipina women in the U.S. by Filipina Women's Network. The OCA Asian Pacific American organization awarded Rozita the Lifetime Achievement Award in 2007. I congratulate Rozita Lee on her success as a businesswoman, a Democratic activist, and as an advocate for Asian and Pacific Islanders.

CONSUMER CREDIT

Mr. UDALL of Colorado. Madam President, I rise today to discuss an

issue of importance to all American consumers who rely on credit cards, especially during our economic downturn. More specifically, I would like to address two pieces of critically important legislation that would help consumers.

First, last week I introduced legislation to move up the effective date of credit card reforms outlined in the Credit CARD Act, which was signed into law by President Obama in May. The act gave credit card issuers nine months from the date of enactment to phase out their most egregious practices, including arbitrarily raising interest rates, raising interest rates on existing balances, and charging interest on debt paid on time—the latter a particularly underhanded tactic known as double-cycle billing.

Rather than phasing out these practices before the new requirements take effect, credit card issuers have increased them, squeezing as much as they can out of American consumers prior to the date the reforms are scheduled to go into effect. A Pew Charitable Trusts study to be released later this week will reveal that through the first 6 months of this year, the 12 largest credit card issuers raised interest rates an average of 20 percent, with many cardholders seeing rate increases in excess of 20 percent. This is happening despite the fact that these credit card companies, many of which received taxpayer bailout funds, are reaping the benefit—some might say government subsidy—of Federal interest rates at or near zero percent.

The bill I introduced last week, the Expedited CARD Reform for Consumers Act of 2009, will move the effective date of enactment for all reforms required under the Credit CARD Act to December 1, 2009. The majority of reforms are currently due to go into effect on February 22, 2010, with a few other reforms due to go into effect on August 22, 2010.

We all know how important short-term credit is to families and small businesses, especially during hard economic times. And we have all heard stories of people who have been victimized by the kind of unfair practices that the Credit CARD Act will end. But the truth is I have heard more stories from my constituents about these unfair and deceptive practices since the President signed the Credit CARD Act into law, than I did in the months leading up to the bill's passage. And that's saying something.

Through no fault of their own, many Coloradans have been victimized by their credit card issuer. For example, a constituent named Jean from Commerce City wrote to me:

Recently, CitiBank raised my [credit card] APR to 29.99 percent. I called and found out that they did not raise my rate because I'm late, or have a bad FICO score, but because they sent me a letter with the option to opt OUT of a higher interest rate. I've had this card for over 15 years and never been late. I don't understand how taxpayers gave banks taxpayer money, banks report record profits, and banks still feel they can [take unfair ad-

vantage of] the common Joe. Basically our credit card companies took away our available credit and then raised our credit card rates even though we made payments on time. Please help the citizens of this country instead of helping the few executives at these banks. We really need your help, and in the long run this will help our country.

Likewise, northern Colorado small business owner Ginny Teel, whose company 10 til 2 helps pair businesses with professionals looking for part-time work, recently took to the airwaves to tell a similar story. In a Denver television news story, Ginny reported how her credit card company is doubling her interest rate, from 11 percent to 22 percent, for no reason. Like many small businesses, Ginny relied on her credit card to get her business up and running. In the letter to inform her of the rate increase, Wells Fargo states: "These changes are not a reflection of how you managed your account with us or your credit score." In other words, her credit card issuer is saying it is doubling her interest rate because it still can.

I have heard from hundreds of Coloradans with similar stories since the Credit CARD Act was passed.

For many American families and small businesses, credit cards are more than a convenience, they are a necessity. Short-term credit is sometimes the only way that families can pay for necessities or that small businesses can function. And a well-functioning credit card industry that treats its customers with fairness is absolutely essential to rebuilding our economy.

I first introduced legislation to end unfair and abusive credit card practices in 2005 as a Member of the House of Representatives, and I was honored to be a part of finally passing real reform earlier this year. But I am equally disappointed that credit card issuers would now bleed American consumers for as much as they can prior to the reforms taking effect.

My legislation is supported by consumer advocate organizations, including the member organizations of Americans for Fairness in Lending, as well as the National Small Business Association, whose members, like Ginny Teel, increasingly rely on credit cards for their small business needs.

During debate on the Credit CARD Act earlier this year, credit card companies told Congress they needed more time to implement the bill's reforms, and Congress accommodated them. Rather than phase out these practices, however, credit card companies have used this extra time to declare open season on their customers. If credit card companies can increase abuse on a moment's notice, then surely they can end consumer abuse in short order.

Credit card issuers have shown they cannot be trusted to act in the interest of the American consumer. It is time to force credit card companies to finally deal honestly with American taxpayers and comply with the reforms passed earlier this year.

I thank Senators SCHUMER, HARKIN, LEVIN, BINGAMAN, TESTER, and

MERKLEY for cosponsoring the Expedited CARD Reform for Consumers Act. In addition, along with Senate Banking Committee Chairman DODD, today I cosponsored a bill that would immediately freeze interest rates on existing credit card balances. This is an important bill that will allow consumers to pay off their credit card debt at the interest rate they consented to when they took on that debt. It is a matter of fairness. I look forward to working with Chairman DODD and colleagues from both parties to pass these important bills as quickly as possible.

FIREARM DEATHS

Mr. LEVIN. Madam President, according to the latest data from the Centers for Disease Control and Prevention, CDC, 3,184 children and teens died from a firearm in the United States in 2006, a 6 percent increase from 2005. This breaks down to the life of an American child being taken every 2 hours and 45 minutes by someone wielding a gun. More than five times as many, or nearly 17,500 children and teens suffered a nonfatal gun injury that year, a 7 percent increase from the previous year.

The 2009 Children's Defense Fund's report "Protect Children, Not Guns" illustrates the problem even more pointedly. The report, which provides key findings on children's gun deaths, states that more preschoolers were killed by firearms in 2006 than were law enforcement officers in the line of duty.

This type of violence is preventable. It only requires action. The Children's Defense Fund's report makes a number of recommendations about how to protect children from gun violence. Among other things, they recommend schools provide nonviolent conflict resolution courses for all students and communities create positive activities for children and teenagers to reduce the influence of gangs and drugs. They also recommend passage of such common sense gun safety legislation as closing the gun show loophole, strengthening the Brady background check system and reauthorizing the assault weapons ban.

We cannot afford to sit and watch as so many young lives are irrevocably destroyed by gun violence. Passage of commonsense legislation would help end these types of tragedies.

REMEMBERING SPECIALIST JACOB WILLIAM SEXTON

Mr. BAYH. Madam President, I rise today to honor the life of Army SPC Jacob William Sexton. A member of Company A, 2nd Battalion 151st Infantry of the Indiana National Guard, Jacob was only 21 years old when his life came to a tragic end on October 12, 2009, while on leave from active deployment in Afghanistan.

Today, I join Jacob's family and friends in mourning his untimely death. Jacob will be remembered as a loving brother, son and friend to many.

He is survived by his parents, Jeffery and Barbara; his three brothers, Joshua, Jeremiah and Jared; his paternal grandparents; maternal grandmother; and a community of friends and family members. Like two of his brothers, Jacob followed in the footsteps of his father, an Army veteran. His brother described Jacob as his father's best friend.

A native of Farmland, IN, Jacob enlisted in the National Guard after graduating from Monroe Central High School in 2006. He served his first tour in Iraq with the Winchester guard unit as a humvee driver. Upon returning home, he continued to serve his country by training other military humvee drivers and keeping charge of weapons and ammunition at Camp Atterbury. More recently, he was deployed near Kabul, Afghanistan, where he was described by his superiors as a model soldier with good morale and an excellent sense of humor.

While we struggle to express our sorrow over the loss of Jacob, we can take pride in the example he set as a soldier, a son, a grandson, and a brother. Today and always, he will be remembered by family, friends, and fellow Hoosiers as a true American hero, and we cherish the legacy of his service and his life.

It is my sad duty to enter the name of Jacob William Sexton in the record of the Senate for his service to this country and for his profound commitment to freedom, democracy and peace.

I pray that the Sexton family can find comfort in the words of the prophet Isaiah who said, "He will swallow up death in victory; and the Lord God will wipe away tears from off all faces."

ADDITIONAL STATEMENTS

RECOGNIZING THE I HAVE WINGS BREAST CANCER FOUNDATION

• Mr. BUNNING. Madam President, today I would like to recognize the I Have Wings breast cancer foundation in Erlanger, KY. October is National Breast Cancer Awareness Month and I Have Wings has dedicated its efforts to the ongoing battle against breast cancer.

According to the American Cancer Society, this year over 190,000 new cases of invasive breast cancer will be diagnosed in our Nation and an estimated 40,000 Americans will lose their fight with breast cancer. At the same time, today there are millions of women in our country who have been treated for breast cancer.

Throughout my tenure as a U.S. Senator, I have supported legislation to increase awareness, prevention, and funding for breast cancer. Too often we hear about a case of breast cancer that is caught at a late stage, leaving the patient and families with little hope. These stories remind us why we must continue to support and expand National Breast Cancer Awareness Month efforts.

The I Have Wings foundation is a leader in the fight against breast cancer. It strives to educate individuals,

provides encouragement for those in need, and generously supports research efforts in Kentucky. And while efforts by I Have Wings and other breast cancer foundations often go unnoticed in the ongoing battle against this deadly disease, we must remember that they play an important role as an activist and educator in our communities.

Again, I commend the efforts of the I Have Wings foundation as our Nation continues to spread breast cancer awareness.●

REMEMBERING DANIEL MELNICK

• Mr. DODD. Madam President, I wish to speak in honor of a good friend and a friend to American cinema, Daniel Melnick, who passed away recently at the age of 77.

Those who know Hollywood will remember Daniel as a successful producer of film and television, and as a studio executive who believed in audacity and creativity—a filmmaker's studio executive, if you will.

He was a prodigy, becoming the youngest producer at CBS Television at the age of 19, where he worked on such series as the legendary "Get Smart," and producing his first feature film at MGM, the thrilling "Straw Dogs," before he turned 40. Over the next decade, he played a role in the development of films ranging from "Network" to "Kramer vs. Kramer" to "The China Syndrome," while serving as head of production at both MGM and Columbia.

As a film producer, Daniels's credits include "All That Jazz," "Altered States," "Footloose," "Roxanne," and "L.A. Story." Fittingly, his work as a producer was bold and vibrant—just the sort of films he encouraged as a studio executive.

In all, Daniel's films were nominated for more than 80 Academy Awards, and won more than two dozen Oscars.

I will remember Daniel as a warm, funny, breathtakingly creative friend whose beautiful house in Utah was the site of many wonderful get-togethers. We are poorer for the loss, but richer for all he gave to our country and the arts.●

TIRBUTE TO LIEUTENANT COLONEL MICHEL G. JONES

• Mr. INHOFE. Madam President, today, I recognize the service LTC Michel "Shel" G. Jones, on the occasion of his retirement from active duty in the U.S. Army. Lieutenant Colonel Jones is an exceptional officer who has served our great Nation for more than 28 years, including 22 years on active duty and 6 years in the Iowa Army National Guard.

I have personally come to know and respect Lieutenant Colonel Jones over the 2½ years he served as an Army congressional liaison for the Army's weapons and tracked combat vehicles programs, to include the Army's Future

Combat System. His expertise and commitment were instrumental in educating Members and staff in the Senate and House on Army combat systems, modernization programs and initiatives. His tireless efforts working with Members and staff of the Senate and House Armed Services Committees were instrumental in the successful authorization and appropriation of the Abrams tank, Bradley fighting vehicle, small arms and crew-served weapons, Stryker, elements of the Future Combat System and the Paladin Integrated Management programs.

Lieutenant Colonel Jones' congressional liaison assignment was only the capstone to what is an outstanding career of service to the Army and our Nation. He served as an armor officer in numerous command and staff positions. His operational assignments began in the Mojave Desert at Fort Irwin, CA, serving as a platoon leader at the National Training Center where he trained thousands of soldiers in desert warfare. He served as commander for Alpha Company, 4th Battalion 37th Armor, Heavy, followed by command of Headquarters and Headquarters Company, 2nd of the 70th Armor Battalion with the 1st Armored Division at Fort Riley, KS. After transitioning in to the acquisition career field, Lieutenant Colonel Jones was assigned to Fort Knox, KY, as a combat development officer and as a project manager for the Army's Future Combat System, FCS, in Detroit, MI.

The strength of our soldiers comes from their families. Lieutenant Colonel Jones' strength came from his wife Dynette, and his two sons Colton and Conner. This Nation is grateful for their commitment and personal sacrifices made throughout Shel's military service. We also thank his mother Joyce, who recently passed, and his father William "Gerry" Jones for raising such a fine son and patriot. Shel is from a military family. His father is a retired soldier and his brother, Dr. Keith Jones, serves as a major in the National Guard. This Nation remains indebted to your service.

On behalf of the Senate and the United States of America, I commend Lieutenant Colonel Jones for his tireless efforts in the support of our Army, our military, and our Nation. As Shel and his family prepare to start a new life in the great State of Oklahoma, I congratulate him on completing an extremely successful military career and wish all of them the best in all their future endeavors.●

TRIBUTE TO KAREN M. ECKERT

● Ms. LANDRIEU. Madam President, today I celebrate the retirement of Karen M. Eckert after 37 years of excellent service to the federal government. Karen, a remarkable public servant under both the legacy Immigration and Naturalization Service and U.S. Citizenship and Immigration Services, and devoted resident of Buffalo, NY, retired on May 29, 2009.

Karen began her career as an immigration inspector at Niagara Falls, NY, in 1972 and quickly became knowledgeable in all areas of immigration. Her work has touched the lives of thousands—giving hope to countless immigrants and new citizens in pursuit of their dreams, as well as uniting adoptive parents with children in need of a loving home, while striving to protect children and underprivileged birth parents from exploitation.

Karen became a leading expert in intercountry adoption and child citizenship. In this role, she was invaluable in establishing the Child Citizenship Program in Buffalo, NY, drafting orphan regulations, and leading USCIS to take the steps necessary to implement the Hague Convention on Protection of Children and Cooperation in Respect of Intercountry Adoption.

Her outstanding and distinguished service has been recognized through numerous awards, including an Angel in Adoption Award from the Congressional Coalition on Adoption Institute in 2003, the Department of Homeland Security Secretary's Meritorious Service Award in 2006 and the USCIS Director's Award in 2008 for her direction and participation in the Hague Implementation Working Group.

It is impossible to count the number of individuals who have personally benefited from Karen's professionalism, insights and dedication and she will be sincerely missed by her colleagues worldwide.

We congratulate Karen M. Eckert on her outstanding and distinguished career and for the inspiration she is leaving behind.●

RECOGNIZING WORLD WAR II VETERANS

● Mr. LUGAR. Madam President, today I wish to pay tribute to the American men and women who served their country valiantly during World War II, and to a nonprofit organization known as HonorFlight which flies surviving veterans, at no expense to themselves, to Washington, DC, to visit the World War II Memorial. I wish to have printed in the RECORD a letter from Scott C. Stump, a veteran of the U.S. Marine Corps, describing the efforts of HonorFlight which will enable two Hoosier veterans, Harvey H. Hammerlund and Joseph B. Smrt, to visit the World War II Memorial this fall.

The letter follows:

DEAR SENATOR LUGAR: During World War II, 16 million American men and women selflessly, and unflinchingly served our country and defended our way of life for future generations. Now, more than 64 years since the end of that Great War, only three million of our World War II Veterans walk among us. Even more alarming, we are losing these veterans at the rate of 1,000 per day, which is causing their ranks to dwindle at an alarming rate. Now more than ever, we need to take pause and recognize these veterans and their contributions to making our great country what she is today. Part of that recognition,

the National World War II Monument in Washington, DC, was completed and opened to World War II Veterans and the public on 29 April 2004.

Since its opening, the monument has been like a shining star, beckoning to our World War II Veterans. In fact, many of those veterans have had a dream of visiting this monument erected to the remembrance of "The Greatest Generation." Unfortunately, due to health, monetary, and other constraints, many World War II Veterans have been unable to visit "their" Memorial.

In 2005 that all began to change when a non-profit organization known as "HonorFlight" was born. Several dedicated individuals had a vision to fly any and all of our World War II Veterans to Washington, to see "their" Memorial, at absolutely no cost to the veterans. This wonderful, all volunteer force, began flying in 2005 and flew a total of 137 Veterans to see the Memorial that first year. Now, a brief four years later, there will be a total of over 42,000 veterans who have been able to fulfill their dreams and wishes of being able to visit Washington, DC and, most importantly, the World War II Memorial.

I would like to publicly thank HonorFlight and their network of dedicated volunteers for all of their efforts in making dreams come true. I am truly humbled to be a small part of such a great organization.

On this date, I would also like to recognize two very special World War II Veterans who are about to embark on a very special journey to Washington, DC. These two Hoosiers, both from the fertile farmlands of Starke County, answered their call to serve their country long ago, and in so doing served with honor, dignity, and courage.

Harvey H. Hammerlund was born on 21 December 1924 in rural Knox, Indiana. Harvey was a farm boy who enlisted in The United States Navy on 4 January 1944. Harvey served on The U.S.S. Urben 631 as an electrician. Harvey spent the remainder of the war traversing the hostile enemy-laden South Pacific. Mr. Hammerlund was discharged on 23 March 1946 at the rank of 3rd Class Petty Officer. Harvey returned home and was a farmer for the remainder of his working years. Harvey was and is a leader in Starke County serving on various boards and committees, as well as being active with V.F.W. Post 748 in Knox. Harvey resides on his farm outside of Knox with Dee, his wife of 59 years.

Joseph B. Smrt was born on 14 February 1916 in North Judson, Indiana. Joe enlisted in The United States Army on 11 December 1942. Joe served in Patton's Third Army in the 94th Division Company B 19th Engineers. Joe proudly served all over Central Europe, including the epic "Battle of the Bulge" in Belgium. Mr. Smrt was discharged on 27 December 1945 but continued serving in The U.S. Army Reserves for the next 33 years, retiring as a Sergeant First Class. Joe worked and continues to work as a Surveyor as his profession and continues to be a pillar of the Starke County Community. Joe still lives in Knox with Ursula, his wife of 58 years.

Thank you, Senator LUGAR, for recognizing a great organization and two outstanding individuals. These two men have truly played a part in shaping the America that we know and love today.

Sincerely,

SCOTT C. STUMP. ●

MESSAGES FROM THE PRESIDENT

Messages from the President of the United States were communicated to the Senate by Mrs. Neiman, one of his secretaries.

EXECUTIVE MESSAGES REFERRED

As in executive session the Presiding Officer laid before the Senate messages from the President of the United States submitting sundry nominations which were referred to the appropriate committees.

(The nominations received today are printed at the end of the Senate proceedings.)

NATIONAL EMERGENCY WITH RESPECT TO THE 2009 H1N1 INFLUENZA PANDEMIC IN THE UNITED STATES—PM 36

The PRESIDING OFFICER laid before the Senate the following message from the President of the United States, together with an accompanying report; which was referred to the Committee on Banking, Housing, and Urban Affairs:

To the Congress of the United States:

Pursuant to section 201 of the National Emergencies Act (50 U.S.C. 1621), I hereby report that I have exercised my authority to declare a national emergency in order to be prepared in the event of a rapid increase in illness across the Nation that may overburden health care resources. This declaration will allow the Secretary of Health and Human Services, if necessary, to temporarily waive certain standard Federal requirements in order to enable U.S. health care facilities to implement emergency operations plans to deal with the 2009 H1N1 influenza pandemic in the United States. A copy of my proclamation is attached.

Further, I have authorized the Secretary of Health and Human Services to exercise the authority under section 1135 of the Social Security Act to temporarily waive or modify certain requirements of the Medicare, Medicaid, and State Children's Health Insurance programs and of the Health Insurance Portability and Accountability Act Privacy Rule as necessary to respond to the pandemic throughout the duration of the public health emergency declared in response to the 2009 H1N1 influenza pandemic.

BARACK OBAMA.
THE WHITE HOUSE, October 23, 2009.

MESSAGE FROM THE HOUSE
DURING ADJOURNMENT

ENROLLED BILL SIGNED

Under the authority of the order of the Senate of January 6, 2009, the Secretary of the Senate, on October 23, 2009, during the adjournment of the Senate, received a message from the House of Representatives announcing that the Speaker has signed the following enrolled bill:

S. 1793. A bill to amend title XXVI of the Public Health Service Act to revise and extend the program for providing life-saving care for those with HIV/AIDS.

The enrolled bill was subsequently signed during the session of the Senate by the President pro tempore (Mr. BYRD).

MESSAGES FROM THE HOUSE

At 2:04 p.m., a message from the House of Representatives, delivered by Ms. Brandon, one of its reading clerks, announced that the House has passed the following bill, in which it requests the concurrence of the Senate:

H.R. 3585. An act to guide and provide for United States research, development, and demonstration of solar energy technologies, and for other purposes.

ENROLLED BILL SIGNED

The message also announced that the Speaker has signed the following enrolled bill:

H.R. 2647. An act to authorize appropriations for fiscal year 2010 for military activities of the Department of Defense, for military construction, and for defense activities of the Department of Energy, to prescribe military personnel strengths for such fiscal year, and for other purposes.

The enrolled bill was subsequently signed by the President pro tempore (Mr. BYRD).

At 5:19 p.m., a message from the House of Representatives, delivered by Mrs. Cole, one of its reading clerks, announced that the House has passed the following bill, in which it requests the concurrence of the Senate:

H.R. 3619. An act to authorize appropriations for the Coast Guard for fiscal year 2010, and for other purposes.

MEASURES REFERRED

The following bill was read the first and the second times by unanimous consent, and referred as indicated:

H.R. 3585. An act to guide and provide for United States research, development, and demonstration of solar energy technologies, and for other purposes; to the Committee on Energy and Natural Resources.

MEASURES PLACED ON THE
CALENDAR

The following bill was read the second time, and placed on the calendar:

S. 1858. A bill to require Senate candidates to file designations, statements, and reports in electronic form.

MEASURES READ THE FIRST TIME

The following bill was read the first time:

S. 1927. A bill to establish a moratorium on credit card interest rate increases, and for other purposes.

EXECUTIVE AND OTHER
COMMUNICATIONS

The following communications were laid before the Senate, together with accompanying papers, reports, and documents, and were referred as indicated:

EC-3472. A communication from the Director of the Regulatory Management Division, Office of Policy, Economics, and Innovation, Environmental Protection Agency, transmitting, pursuant to law, the report of a rule entitled "Cold Pressed Neem Oil; Exemption from the Requirement of a Tolerance" (FRL No. 8434-5) received in the Office of the Presi-

dent of the Senate on October 21, 2009; to the Committee on Agriculture, Nutrition, and Forestry.

EC-3473. A communication from the Director of the Regulatory Management Division, Office of Policy, Economics, and Innovation, Environmental Protection Agency, transmitting, pursuant to law, the report of a rule entitled "Pyriproxyfen; Pesticide Tolerances" (FRL No. 8795-3) received in the Office of the President of the Senate on October 21, 2009; to the Committee on Agriculture, Nutrition, and Forestry.

EC-3474. A communication from the Administrator of the Environmental Protection Agency, transmitting, pursuant to law, the report of a violation of the Antideficiency Act that occurred on September 30, 2008 in Account 6880118 entitled the "Abatement, Control, and Compliance Loan Program Account"; to the Committee on Appropriations.

EC-3475. A communication from the Department of State, transmitting, pursuant to law, a report relative to the transfer of detainees (OSS Control No. 2009-1785); to the Committee on Armed Services.

EC-3476. A communication from the Assistant General Counsel for Legislation and Regulatory Law, Office of Energy Efficiency and Renewable Energy, Department of Energy, transmitting, pursuant to law, the report of a rule entitled "Energy Conservation Program: Repeal of Test Procedures for Televisions" (RIN1904-AC09) received in the Office of the President of the Senate on October 21, 2009; to the Committee on Energy and Natural Resources.

EC-3477. A communication from the Director of the Regulatory Management Division, Office of Policy, Economics, and Innovation, Environmental Protection Agency, transmitting, pursuant to law, the report of a rule entitled "Change of Address for Region 4 State and Local Agencies; Technical Correction" (FRL No. 8973-6) received in the Office of the President of the Senate on October 21, 2009; to the Committee on Environment and Public Works.

EC-3478. A communication from the Director of the Regulatory Management Division, Office of Policy, Economics, and Innovation, Environmental Protection Agency, transmitting, pursuant to law, the report of a rule entitled "Stay of Clean Air Interstate Rule for Minnesota; Stay of Federal Implementation Plan to Reduce Interstate Transport of Fine Particulate Matter and Ozone for Minnesota" (FRL No. 8972-7) received in the Office of the President of the Senate on October 21, 2009; to the Committee on Environment and Public Works.

EC-3479. A communication from the Director of the Regulatory Management Division, Office of Policy, Economics, and Innovation, Environmental Protection Agency, transmitting, pursuant to law, the report of a rule entitled "National Emission Standards for Hazardous Air Pollutants for Chemical Manufacturing Area Sources" (FRL No. 8972-6) received in the Office of the President of the Senate on October 21, 2009; to the Committee on Environment and Public Works.

EC-3480. A communication from the Director of the Regulatory Management Division, Office of Policy, Economics, and Innovation, Environmental Protection Agency, transmitting, pursuant to law, the report of a rule entitled "National Emission Standards for Hazardous Air Pollutants From Petroleum Refineries" (FRL No. 8972-4) received in the Office of the President of the Senate on October 21, 2009; to the Committee on Environment and Public Works.

EC-3481. A communication from the Director of the Regulatory Management Division, Office of Policy, Economics, and Innovation, Environmental Protection Agency, transmitting, pursuant to law, the report of a rule entitled "Approval and Promulgation of Implementation Plans; Kentucky: NOx SIP Call

Phase II" (FRL No. 8972-2) received in the Office of the President of the Senate on October 21, 2009; to the Committee on Environment and Public Works.

EC-3482. A communication from the Director of the Regulatory Management Division, Office of Policy, Economics, and Innovation, Environmental Protection Agency, transmitting, pursuant to law, the report of a rule entitled "Approval and Promulgation of Air Quality Implementation Plans; Virginia; Revision to Clean Air Interstate Rule Sulfur Dioxide Trading Program" (FRL No. 8971-4) received in the Office of the President of the Senate on October 21, 2009; to the Committee on Environment and Public Works.

EC-3483. A communication from the Chief of the Publications and Regulations Branch, Internal Revenue Service, Department of the Treasury, transmitting, pursuant to law, the report of a rule entitled "Inflation Adjusted Items for 2010" (Rev. Proc. 2009-50) received in the Office of the President of the Senate on October 21, 2009; to the Committee on Finance.

EC-3484. A communication from the Chief of the Publications and Regulations Branch, Internal Revenue Service, Department of the Treasury, transmitting, pursuant to law, the report of a rule entitled "Guidance Under Section 205 Regarding Post-Death Events" (RIN1545-BC56)(TD 9468)) received in the Office of the President of the Senate on October 21, 2009; to the Committee on Finance.

EC-3485. A communication from the Chief of the Publications and Regulations Branch, Internal Revenue Service, Department of the Treasury, transmitting, pursuant to law, the report of a rule entitled "Rule 4221(e) Reciprocal Privileges" (Revenue Ruling 2009-34) received in the Office of the President of the Senate on October 21, 2009; to the Committee on Finance.

EC-3486. A communication from the Chief of the Publications and Regulations Branch, Internal Revenue Service, Department of the Treasury, transmitting, pursuant to law, the report of a rule entitled "Guidance for Expatriates Under Section 877A" (Notice No. 2009-85) received in the Office of the President of the Senate on October 21, 2009; to the Committee on Finance.

EC-3487. A communication from the Deputy Director of Regulations and Policy Management Staff, Food and Drug Administration, Department of Health and Human Services, transmitting, pursuant to law, the report of a rule entitled "Medical Devices; Immunology and Microbiology Devices; Classification of Respiratory Viral Panel Multiplex Nucleic Acid Assay" (Docket No. FDA-2009-N-0119) received in the Office of the President of the Senate on October 21, 2009; to the Committee on Health, Education, Labor, and Pensions.

EC-3488. A communication from the Federal Liaison Officer, Patent and Trademark Office, Department of Commerce, transmitting, pursuant to law, the report of a rule entitled "Changes in Requirements for Signature of Documents, Recognition of Representatives, and Establishing and Changing the Correspondence Address in Trademark Cases" (RIN0651-AC26) received in the Office of the President of the Senate on October 21, 2009; to the Committee on the Judiciary.

EC-3489. A communication from the Assistant Attorney General, Office of Legislative Affairs, Department of Justice, transmitting, pursuant to law, the Fiscal Years 2006 and 2007 Annual Report to Congress for the Office of Justice Programs' Bureau of Justice Assistance; to the Committee on the Judiciary.

EC-3490. A communication from the Director, National Drug Control Policy, Executive Office of the President, transmitting the availability of a report relative to the Office

of National Drug Control Policy in GAO-09-709 entitled "Firearms Trafficking: U.S. Efforts to Combat Arms Trafficking to Mexico Face Planning and Coordination Challenges"; to the Committee on the Judiciary.

EC-3491. A communication from the Chief Counsel, Federal Emergency Management Agency, Department of Homeland Security, transmitting, pursuant to law, the report of a rule entitled "Suspension of Community Eligibility" ((44 CFR Part 64)(Docket ID FEMA-2008-0020; Internal Agency Docket No. FEMA-8097)) received in the Office of the President of the Senate on October 21, 2009; to the Committee on Banking, Housing, and Urban Affairs.

REPORTS OF COMMITTEES

The following reports of committees were submitted:

By Mr. LIEBERMAN, from the Committee on Homeland Security and Governmental Affairs, with an amendment:

S. 872. A bill to establish a Deputy Secretary of Homeland Security for Management, and for other purposes (Rept. No. 111—91).

INTRODUCTION OF BILLS AND JOINT RESOLUTIONS

The following bills and joint resolutions were introduced, read the first and second times by unanimous consent, and referred as indicated:

By Ms. LANDRIEU:

S. 1863. A bill to extend the temporary suspension of duty on Terrazole; to the Committee on Finance.

By Ms. LANDRIEU:

S. 1864. A bill to extend the temporary suspension of duty on 2-Mercaptoethanol; to the Committee on Finance.

By Ms. LANDRIEU:

S. 1865. A bill to extend the temporary suspension of duty on Bifenazate; to the Committee on Finance.

By Mr. KERRY:

S. 1866. A bill to amend title 38, United States Code, to provide for the eligibility of parents of certain deceased veterans for interment in national cemeteries; to the Committee on Veterans' Affairs.

By Mr. CASEY:

S. 1867. A bill to extend the temporary suspension of duty on phenyl isocyanate; to the Committee on Finance.

By Mr. CASEY:

S. 1868. A bill to renew the temporary suspension of duty on hydroxylamine; to the Committee on Finance.

By Mr. CASEY:

S. 1869. A bill to extend temporarily the suspension of duty on mixed xylidines; to the Committee on Finance.

By Mr. CASEY:

S. 1870. A bill to extend the temporary suspension of duty on trichlorobenzene; to the Committee on Finance.

By Mr. CASEY:

S. 1871. A bill to extend the temporary suspension of duty on methanol, sodium salt; to the Committee on Finance.

By Mr. CASEY:

S. 1872. A bill to extend the temporary suspension of duty on 2-Phenylphenol; to the Committee on Finance.

By Mr. CASEY:

S. 1873. A bill to extend the temporary suspension of duty on 2, 3-Dichloronitrobenzene; to the Committee on Finance.

By Mr. CASEY:

S. 1874. A bill to extend the temporary suspension of duty on titanium dioxide; to the Committee on Finance.

By Mr. CASEY:

S. 1875. A bill to extend the temporary suspension of duty on Orgasol; to the Committee on Finance.

By Mr. CASEY:

S. 1876. A bill to suspend temporarily the duty on 11-Aminoundecanoic acid; to the Committee on Finance.

By Mr. CASEY:

S. 1877. A bill to suspend temporarily the duty on dry adhesive copolyamide pellets; to the Committee on Finance.

By Mr. CASEY:

S. 1878. A bill to extend and amend the temporary duty suspension on certain thin fiberglass sheets; to the Committee on Finance.

By Mr. CASEY:

S. 1879. A bill to clarify the tariff classification of certain fiberboard core and laminate boards and panels, and for other purposes; to the Committee on Finance.

By Mr. CASEY:

S. 1880. A bill to extend the temporary suspension of duty on Chlorotoluene; to the Committee on Finance.

By Mr. CASEY:

S. 1881. A bill to extend the temporary suspension of duty on bayderm bottom DLV-N; to the Committee on Finance.

By Mr. CASEY:

S. 1882. A bill to extend the temporary suspension of duty on certain ethylene-vinyl acetate copolymers; to the Committee on Finance.

By Mr. CASEY:

S. 1883. A bill to extend and modify the temporary suspension of duty on iminodisuccinate; to the Committee on Finance.

By Mr. CASEY:

S. 1884. A bill to suspend temporarily the duty on MDA50; to the Committee on Finance.

By Mr. CASEY:

S. 1885. A bill to suspend temporarily the duty on certain air pressure distillation columns; to the Committee on Finance.

By Mr. CASEY:

S. 1886. A bill to suspend temporarily the duty on Epilink 701; to the Committee on Finance.

By Mr. CASEY:

S. 1887. A bill to suspend temporarily the duty on Nourybond 276 Modifier; to the Committee on Finance.

By Mr. CASEY:

S. 1888. A bill to extend the temporary suspension of duty on 2-ethylhexyl 4-methoxycinamate; to the Committee on Finance.

By Mr. CASEY:

S. 1889. A bill to extend the temporary suspension of duty on glass bulbs, designed for sprinkler systems and other release devices; to the Committee on Finance.

By Mr. CASEY:

S. 1890. A bill to suspend temporarily the duty on manganese flake containing at least 99.5 percent by weight of manganese; to the Committee on Finance.

By Mr. CASEY:

S. 1891. A bill to suspend temporarily the duty on standard grade ferroniobium; to the Committee on Finance.

By Mr. CASEY:

S. 1892. A bill to suspend temporarily the duty on methyl sulfonic acid; to the Committee on Finance.

By Mr. CASEY:

S. 1893. A bill to suspend temporarily the duty on Benzenamine, 4 Dodecyl; to the Committee on Finance.

By Mr. CASEY:

S. 1894. A bill to suspend temporarily the duty on N-Benzyl-N-ethylaniline; to the Committee on Finance.

By Mr. CASEY:

S. 1895. A bill to suspend temporarily the duty on p-Dodecyl aniline; to the Committee on Finance.

By Mr. CASEY:

S. 1896. A bill to suspend temporarily the duty on stainless steel single-piece exhaust gas manifolds; to the Committee on Finance.

By Mr. ROBERTS:

S. 1897. A bill to extend the temporary suspension of duty on phosphor zinc silicate; to the Committee on Finance.

By Mr. ROBERTS:

S. 1898. A bill to extend the temporary suspension of duty on yttrium oxide phosphor; to the Committee on Finance.

By Mr. ROBERTS:

S. 1899. A bill to extend the temporary suspension of duty on yttrium oxide phosphor; to the Committee on Finance.

By Mr. ROBERTS:

S. 1900. A bill to reduce temporarily the duty on Liberty, Rely, and Ignite herbicides; to the Committee on Finance.

By Mr. ROBERTS:

S. 1901. A bill to reduce temporarily the duty on Evergol; to the Committee on Finance.

By Mr. ROBERTS:

S. 1902. A bill to reduce temporarily the duty on Corvus herbicide; to the Committee on Finance.

By Mr. ROBERTS:

S. 1903. A bill to suspend temporarily the duty on 1,3-Dimethyl-1H-pyrazol-5-ol and 1,3-Dimethylpyrazol-5-one; to the Committee on Finance.

By Mr. ROBERTS:

S. 1904. A bill to extend the temporary suspension of duty on certain refracting and reflecting telescopes; to the Committee on Finance.

By Mr. ROBERTS:

S. 1905. A bill to suspend temporarily the duty on certain children's footwear covering the ankle; to the Committee on Finance.

By Mr. ROBERTS:

S. 1906. A bill to suspend temporarily the duty on certain children's footwear; to the Committee on Finance.

By Mr. ROBERTS:

S. 1907. A bill to suspend temporarily the duty on certain leather upper sports footwear; to the Committee on Finance.

By Mr. ROBERTS:

S. 1908. A bill to suspend temporarily the duty on certain sports footwear for women; to the Committee on Finance.

By Mr. ROBERTS:

S. 1909. A bill to extend the temporary suspension of duty on strontium magnesium phosphate-tin doped inorganic products; to the Committee on Finance.

By Mr. ROBERTS:

S. 1910. A bill to extend the temporary suspension of duty on calcium chloride phosphor activated by manganese and antimony; to the Committee on Finance.

By Mr. ROBERTS:

S. 1911. A bill to extend the temporary suspension of duty on mixture used in ceramic arc tubes; to the Committee on Finance.

By Mr. ROBERTS:

S. 1912. A bill to extend the temporary suspension of duty on calcium chloride phosphate; to the Committee on Finance.

By Mr. ROBERTS:

S. 1913. A bill to extend the temporary suspension of duty on resin cement based on calcium carbonate and silicone resins; to the Committee on Finance.

By Mr. ROBERTS:

S. 1914. A bill to extend the temporary suspension of duty on strontium halophosphate doped with europium; to the Committee on Finance.

By Mr. ROBERTS:

S. 1915. A bill to suspend temporarily the duty on certain footwear; to the Committee on Finance.

By Mr. ROBERTS:

S. 1916. A bill to temporarily suspend the duty on certain women's textile upper footwear; to the Committee on Finance.

By Mr. ROBERTS:

S. 1917. A bill to suspend temporarily the duty on certain leather upper sports footwear; to the Committee on Finance.

By Mr. ROBERTS:

S. 1918. A bill to suspend temporarily the duty on certain men's non-work footwear covering the ankle; to the Committee on Finance.

By Mr. ROBERTS:

S. 1919. A bill to suspend temporarily the duty on certain women's footwear; to the Committee on Finance.

By Mr. ROBERTS:

S. 1920. A bill to suspend temporarily the duty on certain sports footwear; to the Committee on Finance.

By Mr. ROBERTS:

S. 1921. A bill to extend the temporary suspension of duty on small particle calcium chloride phosphor; to the Committee on Finance.

By Mr. ROBERTS:

S. 1922. A bill to extend the temporary suspension of duty on lanthanum phosphate phosphor; to the Committee on Finance.

By Mr. ROBERTS:

S. 1923. A bill to extend the temporary suspension of duty on a mixture of barium carbonate, strontium carbonate, calcium carbonate, and 1-methoxy-2-propanol acetate, for use as emitter suspension cathode coating; to the Committee on Finance.

By Mr. ROBERTS:

S. 1924. A bill to extend the temporary suspension of duty on compound barium magnesium aluminate phosphor; to the Committee on Finance.

By Mr. ROBERTS:

S. 1925. A bill to extend the temporary suspension of duty on yttrium vanadate phosphor; to the Committee on Finance.

By Mr. ROBERTS:

S. 1926. A bill to extend the temporary suspension of duty on compound of strontium chloroapatite-europium; to the Committee on Finance.

By Mr. DODD (for himself, Mr. REED, Mr. SCHUMER, Mr. MENENDEZ, Mr. BROWN, Mr. TESTER, Mr. MERKLEY, and Mr. UDALL of Colorado):

S. 1927. A bill to establish a moratorium on credit card interest rate increases, and for other purposes; read the first time.

By Mr. BAUCUS:

S. 1928. A bill to extend and modify the temporary suspension of duty on golf bag bodies made of woven fabrics of nylon or polyester sewn together with pockets, and dividers or graphite protectors, accompanied with rainhoods; to the Committee on Finance.

By Ms. LANDRIEU (for herself and Ms. SNOWE):

S. 1929. A bill to provide for an additional temporary extension of programs under the Small Business Act and the Small Business Investment Act of 1958, and for other purposes; considered and passed.

By Mr. CASEY:

S. 1930. A bill to amend the Internal Revenue Code of 1986 to enhance the administration of, and reduce fraud related to, the first-time homebuyer tax credit, and for other purposes; to the Committee on Finance.

SUBMISSION OF CONCURRENT AND SENATE RESOLUTIONS

The following concurrent resolutions and Senate resolutions were read, and referred (or acted upon), as indicated:

By Mr. FEINGOLD (for himself, Mr. LEAHY, Mr. DURBIN, Mr. CASEY, and Mr. MENENDEZ):

S. Res. 321. A resolution commemorating the lives and work of Jesuit Fathers Ignacio Ellacuria, Ignacio Martin-Baro, Segundo Montes, Amando Lopez, Juan Ramon Moreno, Joaquin Lopez y Lopez, and housekeeper Julia Elba Ramos and her daughter Celina Mariset Ramos on the occasion of the 20th anniversary of their deaths on November 16, 1989, at the Universidad Centroamericana Jose Simeon Canas located in San Salvador, El Salvador; considered and agreed to.

By Mr. LEVIN (for himself, Mr. BROWNBACK, and Mr. DURBIN):

S. Res. 322. A resolution expressing the sense of the Senate on religious minorities in Iraq; to the Committee on Foreign Relations.

ADDITIONAL COSPONSORS

S. 148

At the request of Mr. KOHL, the name of the Senator from Wisconsin (Mr. FEINGOLD) was added as a cosponsor of S. 148, a bill to restore the rule that agreements between manufacturers and retailers, distributors, or wholesalers to set the minimum price below which the manufacturer's product or service cannot be sold violates the Sherman Act.

S. 229

At the request of Mrs. BOXER, the name of the Senator from Washington (Ms. CANTWELL) was added as a cosponsor of S. 229, a bill to empower women in Afghanistan, and for other purposes.

S. 453

At the request of Mr. SCHUMER, the name of the Senator from New York (Mrs. GILLIBRAND) was added as a cosponsor of S. 453, a bill to authorize the Secretary of Housing and Urban Development to make grants and offer technical assistance to local governments and others to design and implement innovative policies, programs, and projects that address widespread property vacancy and abandonment, and for other purposes.

S. 512

At the request of Mr. KOHL, the name of the Senator from Vermont (Mr. LEAHY) was added as a cosponsor of S. 512, a bill to amend chapter 1 of title 9, United States Code with respect to arbitration.

S. 736

At the request of Mr. AKAKA, the name of the Senator from Delaware (Mr. CARPER) was added as a cosponsor of S. 736, a bill to provide for improvements in the Federal hiring process and for other purposes.

S. 812

At the request of Mr. BAUCUS, the name of the Senator from Colorado (Mr. BENNET) was added as a cosponsor of S. 812, a bill to amend the Internal Revenue Code of 1986 to make permanent the special rule for contributions of qualified conservation contributions.

S. 891

At the request of Mr. BROWNBACK, the name of the Senator from Vermont (Mr. SANDERS) was added as a cosponsor of S. 891, a bill to require annual

disclosure to the Securities and Exchange Commission of activities involving columbite-tantalite, cassiterite, and wolframite from the Democratic Republic of Congo, and for other purposes.

S. 1156

At the request of Mr. HARKIN, the name of the Senator from Oregon (Mr. WYDEN) was added as a cosponsor of S. 1156, a bill to amend the Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users to reauthorize and improve the safe routes to school program.

S. 1183

At the request of Mr. DURBIN, the name of the Senator from Maryland (Mr. CARDIN) was added as a cosponsor of S. 1183, a bill to authorize the Secretary of Agriculture to provide assistance to the Government of Haiti to end within 5 years the deforestation in Haiti and restore within 30 years the extent of tropical forest cover in existence in Haiti in 1990, and for other purposes.

S. 1304

At the request of Mr. GRASSLEY, the name of the Senator from Kentucky (Mr. BUNNING) was added as a cosponsor of S. 1304, a bill to restore the economic rights of automobile dealers, and for other purposes.

S. 1313

At the request of Mr. LUGAR, the name of the Senator from Kentucky (Mr. BUNNING) was added as a cosponsor of S. 1313, a bill to amend the Internal Revenue Code of 1986 to permanently extend and expand the charitable deduction for contributions of food inventory.

S. 1345

At the request of Mr. REED, the name of the Senator from Washington (Ms. CANTWELL) was added as a cosponsor of S. 1345, a bill to aid and support pediatric involvement in reading and education.

S. 1400

At the request of Mr. BROWNBACK, his name was added as a cosponsor of S. 1400, a bill to amend the Internal Revenue Code of 1986 to make permanent the depreciation classification of motorsports entertainment complexes.

S. 1470

At the request of Mr. TESTER, the name of the Senator from Montana (Mr. BAUCUS) was added as a cosponsor of S. 1470, a bill to sustain the economic development and recreational use of National Forest System land and other public land in the State of Montana, to add certain land to the National Wilderness Preservation System, to release certain wilderness study areas, to designate new areas for recreation, and for other purposes.

S. 1610

At the request of Ms. CANTWELL, the names of the Senator from Hawaii (Mr. INOUE) and the Senator from Mississippi (Mr. COCHRAN) were added as cosponsors of S. 1610, a bill to amend

the Internal Revenue Code of 1986 to repeal the shipping investment withdrawal rules in section 955 and to provide an incentive to reinvest foreign shipping earnings in the United States.

S. 1652

At the request of Mr. HARKIN, the names of the Senator from California (Mrs. BOXER) and the Senator from Illinois (Mr. DURBIN) were added as cosponsors of S. 1652, a bill to amend part B of the Individuals with Disabilities Education Act to provide full Federal funding of such part.

S. 1668

At the request of Mr. BENNET, the name of the Senator from North Carolina (Mrs. HAGAN) was added as a cosponsor of S. 1668, a bill to amend title 38, United States Code, to provide for the inclusion of certain active duty service in the reserve components as qualifying service for purposes of Post-9/11 Educational Assistance Program, and for other purposes.

S. 1678

At the request of Mr. CARDIN, the name of the Senator from South Dakota (Mr. JOHNSON) was added as a cosponsor of S. 1678, a bill to amend the Internal Revenue Code of 1986 to extend the first-time homebuyer tax credit, and for other purposes.

S. 1681

At the request of Mr. LEAHY, the name of the Senator from West Virginia (Mr. ROCKEFELLER) was added as a cosponsor of S. 1681, a bill to ensure that health insurance issuers and medical malpractice insurance issuers cannot engage in price fixing, bid rigging, or market allocations to the detriment of competition and consumers.

S. 1683

At the request of Mr. BENNET, the name of the Senator from Georgia (Mr. ISAKSON) was added as a cosponsor of S. 1683, a bill to apply recaptured taxpayer investments toward reducing the national debt.

S. 1686

At the request of Mr. FEINGOLD, the name of the Senator from New Jersey (Mr. LAUTENBERG) was added as a cosponsor of S. 1686, a bill to place reasonable safeguards on the use of surveillance and other authorities under the USA PATRIOT Act, and for other purposes.

S. 1730

At the request of Mr. FRANKEN, the name of the Senator from Alaska (Mr. BEGICH) was added as a cosponsor of S. 1730, a bill to provide for minimum loss ratios for health insurance coverage.

S. 1731

At the request of Mr. REED, the name of the Senator from New Jersey (Mr. MENENDEZ) was added as a cosponsor of S. 1731, a bill to require certain mortgagees to make loan modifications, to establish a grant program for State and local government mediation programs, to create databases on foreclosures, and for other purposes.

S. 1740

At the request of Mrs. MURRAY, the name of the Senator from Vermont

(Mr. LEAHY) was added as a cosponsor of S. 1740, a bill to promote the economic security and safety of victims of domestic violence, dating violence, sexual assault, or stalking, and for other purposes.

S. 1744

At the request of Mr. SCHUMER, the name of the Senator from Maine (Ms. COLLINS) was added as a cosponsor of S. 1744, a bill to require the Administrator of the Federal Aviation Administration to prescribe regulations to ensure that all crewmembers on air carriers have proper qualifications and experience, and for other purposes.

S. 1748

At the request of Mrs. BOXER, the name of the Senator from California (Mrs. FEINSTEIN) was added as a cosponsor of S. 1748, a bill to establish a program of research, recovery, and other activities to provide for the recovery of the southern sea otter.

S. 1781

At the request of Mrs. SHAHEEN, the name of the Senator from New Jersey (Mr. LAUTENBERG) was added as a cosponsor of S. 1781, a bill to provide for a demonstration program to reduce frequent use of health services by Medicaid beneficiaries with chronic illnesses by providing coordinated care management and community support services.

S. 1832

At the request of Ms. LANDRIEU, the name of the Senator from Michigan (Mr. LEVIN) was added as a cosponsor of S. 1832, a bill to increase loan limits for small business concerns, provide for low interest refinancing for small business concerns, and for other purposes.

S. 1833

At the request of Mr. UDALL of Colorado, the name of the Senator from Iowa (Mr. HARKIN) was added as a cosponsor of S. 1833, a bill to amend the Credit Card Accountability Responsibility and Disclosure Act of 2009 to establish an earlier effective date for various consumer protections, and for other purposes.

S. 1834

At the request of Mr. AKAKA, the name of the Senator from Oregon (Mr. WYDEN) was added as a cosponsor of S. 1834, a bill to amend the Animal Welfare Act to ensure that all dogs and cats used by research facilities are obtained legally.

S. 1859

At the request of Mr. ROCKEFELLER, the name of the Senator from Illinois (Mr. DURBIN) was added as a cosponsor of S. 1859, a bill to reinstate Federal matching of State spending of child support incentive payments.

S. RES. 312

At the request of Mr. DODD, the names of the Senator from Indiana (Mr. LUGAR) and the Senator from Vermont (Mr. LEAHY) were added as cosponsors of S. Res. 312, a resolution expressing the sense of the Senate on empowering and strengthening the United

States Agency for International Development (USAID).

AMENDMENT NO. 2699

At the request of Mr. ISAKSON, the names of the Senator from Connecticut (Mr. LIEBERMAN), the Senator from Georgia (Mr. CHAMBLISS), the Senator from Tennessee (Mr. ALEXANDER) and the Senator from Washington (Mrs. MURRAY) were added as cosponsors of amendment No. 2699 intended to be proposed to H.R. 3548, a bill to amend the Supplemental Appropriations Act, 2008 to provide for the temporary availability of certain additional emergency unemployment compensation, and for other purposes.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. DODD (for himself, Mr. REED, Mr. SCHUMER, Mr. MENENDEZ, Mr. BROWN, Mr. TESTER, Mr. MERKLEY, and Mr. UDALL, of Colorado):

S. 1927. A bill to establish a moratorium on credit card interest rate increases, and for other purposes; read the first time.

Mr. DODD. Mr. President, I rise today to offer legislation that would freeze interest rates on existing credit card balances until the full protections of the Credit Card Accountability, Responsibility, and Disclosure Act go into effect in February.

It is clear that credit card companies see gouging consumers as a viable means of padding their profits. When they realized that we were serious about ending these abusive practices, they unfortunately decided to make one last grab for the pocketbooks of American consumers before the law goes into effect.

Even before the Credit CARD Act passed, I heard from Connecticut residents who had seen their interest rates double or even triple with little warning and no explanation. As the law's implementation approaches, credit card companies have continued to jack up their customers' interest rates to get ahead of provisions in the Credit CARD Act that will permanently prohibit them from arbitrarily raising rates on existing balances.

To those of us who have worked to rein in credit card abuses, this greedy behavior is disturbing, although not surprising. But to the families in my home state of Connecticut and around the country who are struggling to make ends meet these days it is something worse.

Debt can crush families, driving them into bankruptcy and shattering the financial foundation they have worked so hard to build. It is impossible to get ahead when you're falling further and further behind each month. The anytime, any-reason rate hikes that credit card companies have used to enrich themselves have destroyed too many American families.

That is why we took action to stop unjustified rate hikes, and why it is an

outrage that credit card companies are trying to jam consumers one last time before our law stops them.

I am not about to let this stand. In April, Senator SCHUMER and I wrote to the Federal Reserve, the Office of Thrift Supervision, and the National Credit Union Administration, calling on them to use their existing authority to implement an emergency freeze on interest rates.

The regulators, unfortunately, did not act. Therefore, on behalf of our constituents, we must. This legislation will immediately freeze interest rates to ensure that Americans are protected until the full Credit CARD Act goes into effect.

When it does, a provision I included in the legislation will hold credit card companies accountable for their recent behavior. Every 6 months, card companies will be required to review each account that they hit with a rate hike since January 1, 2009, and reduce the rate if the customer has become less of a credit risk or the circumstances that warranted the increase are no longer present.

I have directed Federal regulators to notify all credit card companies that they will be required to comply with this provision and to draft regulations that provide clear, strict rules to govern the reviews. Customers that did not deserve to have their rates raised in the first place should not have to be stuck with the higher rate after the Credit CARD Act takes effect.

Consumers have a responsibility to spend within their means and to pay what they owe. But credit card companies have a responsibility to deal with their customers honorably. And they most certainly do not have the right to rip off American families, especially when this Congress has already gone on the record opposing those actions.

Struggling middle class families won a huge victory when we passed the Credit CARD Act. Let us help them win another by ensuring that the credit card companies' reign of greed does not continue for even the short time before the law is implemented. I urge my colleagues to join me in this legislation.

Mr. President, I ask unanimous consent that the text of the bill be printed in the RECORD.

There being no objection, the text of the bill was ordered to be printed in the RECORD, as follows:

S. 1927

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Credit Card Rate Freeze Act of 2009".

SEC. 2. MORATORIUM ON RATE INCREASES.

During the period beginning on the date of enactment of this Act and ending 9 months after the date of enactment of the Credit Card Accountability Responsibility and Disclosure Act of 2009, in the case of any credit card account under an open end consumer credit plan—

(1) no creditor may increase any annual percentage rate, fee, or finance charge appli-

cable to any outstanding balance, except as permitted under subsection 171(b) of the Truth in Lending Act (as added by Public Law 111-24); and

(2) no creditor may change the terms governing the repayment of any outstanding balance, except as set forth in section 171(c) of the Truth in Lending Act (as added by Public Law 111-24).

SEC. 3. DEFINED TERMS.

For purposes of this Act—

(1) the term "annual percentage rate" means an annual percentage rate, as determined under section 107 of the Truth in Lending Act (15 U.S.C. 1606);

(2) the term "finance charge" means a finance charge, as determined under section 106 of the Truth in Lending Act (15 U.S.C. 1605);

(3) the term "outstanding balance" has the same meaning as in section 171(d) of the Truth in Lending Act (as added by Public Law 111-24); and

(4) the terms used in this Act that are defined in section 103 of the Truth in Lending Act (15 U.S.C. 1602) and are not otherwise defined in this Act shall have the same meanings as in section 103 of the Truth in Lending Act.

SEC. 4. REGULATORY AUTHORITY.

(a) IN GENERAL.—The Board of Governors of the Federal Reserve System may issue such rules as may be necessary to carry out this Act.

(b) DATE OF ENACTMENT.—The provisions of this Act shall take effect upon the date of enactment of this Act, regardless of whether rules are issued under subsection (a).

SUBMITTED RESOLUTIONS

SENATE RESOLUTION 321—COMMEMORATING THE LIVES AND WORK OF JESUIT FATHERS IGNACIO ELLACURIA, IGNACIO MARTIN-BARÓ, SEGUNDO MONTES, AMANDO LÓPEZ, JUAN RAMON MORENO, JOAQUÍN LÓPEZ Y LÓPEZ, AND HOUSEKEEPER JULIA ELBA RAMOS AND HER DAUGHTER CELINA MARISSET RAMOS ON THE OCCASION OF THE 20TH ANNIVERSARY OF THEIR DEATHS ON NOVEMBER 16, 1989, AT THE UNIVERSIDAD CENTROAMERICANA JOSÉ SIMEÓN CAÑAS LOCATED IN SAN SALVADOR, EL SALVADOR

Mr. FEINGOLD (for himself, Mr. LEAHY, Mr. DURBIN, Mr. CASEY, and Mr. MENENDEZ) submitted the following resolution which was considered and agreed to:

S. RES. 321

Whereas in the early morning hours of November 16, 1989, 6 Jesuit priests and faculty members of the Universidad Centro-americana José Simeón Cañas ("UCA") located in San Salvador, El Salvador—Fathers Ignacio Ellacuría, Ignacio Martín-Baró, Segundo Montes, Amando López, Juan Ramon Moreno, and Joaquín López y López—and housekeeper Julia Elba Ramos and her daughter, Celina Mariset Ramos, were executed by members of the Salvadoran Army;

Whereas Father Ignacio Ellacuría, aged 59, was since 1979 rector of the UCA and was an internationally-respected intellectual and advocate for human rights and for a negotiated solution to the Salvadoran civil conflict;

Whereas Father Ignacio Martin-Baró, aged 44, was the vice rector of the UCA, a leading analyst of national and regional affairs, the founder and director of the respected polling organization, the Public Opinion Institute, former dean of students, dean of the psychology department, an internationally-renowned pioneer in the field of social psychology, and pastor of the rural community of Jayaque;

Whereas Father Segundo Montes, aged 56, was dean of the department of social sciences, a sociology professor at the UCA, and the founder and director of the Human Rights Institute at the UCA, who did extensive work on Salvadoran refugees in the United States during the period of the Salvadoran conflict, including providing documentation and advice to Members of Congress on refugee issues;

Whereas Father Amando López, aged 53, was a philosophy and theology professor at the UCA, was the former director of the Jesuit seminary in San Salvador, and served as pastor of the Tierra Virgen community in Soyapango, a poor neighborhood in the periphery of San Salvador;

Whereas Father Juan Ramon Moreno, aged 56, was a professor of theology at the UCA, a former novice-master for the Jesuits, and a tireless pastoral worker and spiritual guide;

Whereas Father Joaquín López y López, aged 71, was one of the creators of the UCA and the founder, organizer, and director of Fe y Alegria (Faith and Joy), an organization to address the lack of education in El Salvador, which opened 30 educational centers in marginalized communities throughout El Salvador where 48,000 people received vocational training and education;

Whereas Julia Elba Ramos, aged 42, was the cook and housekeeper for the Jesuit seminarians at the UCA and the wife of Obdulio Lozano, the UCA gardener and groundskeeper;

Whereas Celina Mariset Ramos, aged 16, had finished her first year of high school at the José Damian Villacorta Institute in Santa Tecla, El Salvador and was staying with her mother the night of November 15, 1989;

Whereas the 6 Jesuit priests dedicated their lives to advancing education in El Salvador, protecting and promoting human rights and the end of conflict, and identifying and addressing the economic and social problems that affected the majority of the Salvadoran population;

Whereas the 6 Jesuit priests, as faculty and administrators at the UCA, educated many students throughout the 1970s and 1980s, students who subsequently became Salvadoran government, political, and civil society leaders, and thus helped facilitate communication, dialogue, and negotiations, even during the turbulent years of the armed conflict;

Whereas these 6 priests and 2 women joined the more than 75,000 noncombatants who perished during the Salvadoran civil war;

Whereas on December 6, 1989, Speaker of the House of Representatives Thomas Foley appointed the Speaker's Task Force on El Salvador consisting of 19 Members of the House of Representatives and chaired by Representative John Joseph Moakley of Boston, Massachusetts, to monitor the Salvadoran government's investigation into the murders of the Jesuit priests and 2 women and to look into related issues involving respect for human rights and judicial reform in El Salvador;

Whereas the Speaker's Task Force on El Salvador found that members of the high command of the Salvadoran military were responsible for ordering the murder of the Jesuits and 2 women and for obstructing the subsequent investigation into the crimes;

Whereas the United Nations Commission on the Truth for El Salvador (the "Truth Commission") was established under terms of the January 1992 Peace Accords that ended El Salvador's 12 years of war and was charged to investigate and report to the Salvadoran people on human rights crimes committed by all sides during the course of the war;

Whereas on March 15, 1993, the Truth Commission confirmed the findings of the Speaker's Task Force on El Salvador;

Whereas on September 28, 1991, a Salvadoran jury found 2 Salvadoran military officers guilty of the murders, including Salvadoran Army Colonel Guillermo Alfredo Benavides Moreno, the first time in Salvadoran history in which high-ranking military officers were convicted in a Salvadoran court of law of human rights crimes;

Whereas the UCA remains dedicated to advancing and expanding educational opportunity and providing the highest quality of academic excellence in its studies and courses and maintains a commitment to human rights and social justice;

Whereas the 28 Jesuit colleges and universities in the United States, which represent many of the highest quality academic communities in the Nation, have maintained a sense of solidarity with the UCA and the people of El Salvador and have annually observed the November 16th anniversary of the martyred Jesuits and women;

Whereas in the United States, in El Salvador, and around the world, university programs, academic and scholarly institutes, libraries, research centers, pastoral programs, spiritual centers, and programs dedicated to educational achievement, social justice, human rights, and alleviating poverty have been dedicated in the names of the Jesuit martyrs;

Whereas the international and Salvadoran outcry in response to the deaths of the 6 Jesuits and 2 women and the subsequent investigations into this crime served as a catalyst for negotiations and contributed to the signing of the 1992 Peace Accords, which have allowed the people and the Government of El Salvador to achieve significant progress in creating and strengthening democratic political, economic, and social institutions; and

Whereas November 16, 2009, marks the 20th anniversary of the deaths of the 8 spiritual, courageous, and generous priests, educators, and laywomen: Now, therefore, be it

Resolved, That the Senate—

(1) commemorates the lives and work of Father Ignacio Ellacuria, Father Ignacio Martin-Baró, Father Segundo Montes, Father Amando López, Father Juan Ramon Moreno, Father Joaquín López y López, Julia Elba Ramos, and Celina Mariset Ramos;

(2) extends sympathy to the families, friends, colleagues, and religious communities of the 6 Jesuit priests and 2 laywomen;

(3) recognizes the continuing academic, spiritual, and social contributions of the Universidad Centroamericana José Simeón Cañas ("UCA") in San Salvador, El Salvador;

(4) commends the 28 Jesuit colleges and universities in the United States for their solidarity with the UCA and annual remembrances of the Jesuit martyrs;

(5) continues to find inspiration in the lives and work of the Jesuit martyrs;

(6) remembers the seminal reports by Representative John Joseph Moakley and the Speaker's Task Force on El Salvador in investigating the murders of the 6 priests and 2 laywomen;

(7) acknowledges the role played by the Speaker's Task Force on El Salvador, Representative John Joseph Moakley, the Jesuit leadership of the UCA, and the Salvadoran judicial investigation and convictions in ad-

vancing negotiations to end the war, such that the deaths of the Jesuit martyrs and laywomen contributed directly to achieving the peace to which they had dedicated their lives;

(8) calls upon the people of the United States, academic institutions, and religious congregations to participate in local, national, and international events commemorating the 20th anniversary of the martyrdom of the 6 Jesuit priests and 2 laywomen;

(9) recognizes that, while significant progress has been made during the post-war period, social and economic hardships persist among many sectors of Salvadoran society; and

(10) calls upon the President, the Secretary of State, the Administrator of the United States Agency for International Development, and other Federal departments and agencies to support and collaborate with the Government of El Salvador and other public, private, nongovernmental, and religious organizations in efforts to reduce poverty and hunger and to promote educational opportunity, human rights, the rule of law, and social equity for the people of El Salvador.

SENATE RESOLUTION 322—EXPRESSING THE SENSE OF THE SENATE ON RELIGIOUS MINORITIES IN IRAQ

Mr. LEVIN (for himself, Mr. BROWNBACK, and Mr. DURBIN) submitted the following resolution; which was referred to the Committee on Foreign Relations:

S. RES. 322

Whereas threats against the smallest religious minorities in Iraq jeopardize the future of Iraq as a diverse, pluralistic, and free society;

Whereas according to the United States Commission on International Religious Freedom, there are grave threats to religious freedom in Iraq, particularly for the smallest, most vulnerable religious minorities in Iraq, including Chaldeans, Syriacs, Assyrians, and other Christians, Sabeans, Mandeans, and Yazidis;

Whereas the February 2009 Country Report on Human Rights issued by the Department of State identifies on-going "misappropriation of official authority by sectarian, criminal, and extremist groups" as among the significant and continuing human rights problems in Iraq;

Whereas in recent years, there have been alarming numbers of religiously-motivated killings, abductions, beatings, rapes, threats, intimidation, forced conversions, marriages, and displacement from homes and businesses, and attacks on religious leaders, pilgrims, and holy sites, in Iraq, with the smallest religious minorities in Iraq having been among the most vulnerable, although Iraqis from many religious communities, Muslim and non-Muslim alike, have suffered in this violence;

Whereas the United States Commission on International Religious Freedom continues to recommend that the President designate Iraq as a "country of particular concern", or CPC, under the International Religious Freedom Act of 1998, because of the ongoing, severe abuses of religious freedom in Iraq;

Whereas the Assyrian International News Agency reports that 59 churches have been bombed in Iraq between June 2004 and July 2009;

Whereas persecution and violence in Iraq have extended to church leaders as well, such as the March 2008 kidnapping for ransom and

killing of 65-year old Chaldean Catholic Archbishop Paulos Faraj Rahho;

Whereas members of small religious minority communities in Iraq do not have militia or tribal structures to defend them, do not receive adequate official protection, and are legally, politically, and economically marginalized;

Whereas control of ethnically and religiously mixed areas, including the Nineveh and Kirkuk governorates, is disputed between the Kurdistan regional government and the Government of Iraq, and Chaldeans, Syrians, Assyrians, and other Christians, Sabeen Mandeans, Yazidis, Shabak, and Turkomen are caught in the middle of this struggle for control and have been targeted for abuses and discrimination as a result;

Whereas governments in the region report that approximately 2,400,000 refugees and asylum seekers have fled Iraq since 2003;

Whereas many religious minorities in Iraq, who made up about 3 percent of the population of Iraq in 2003, have fled to other areas in Iraq or to other countries, where they reflect a disproportionately high percentage of registered Iraqi refugees;

Whereas the flight of such refugees has substantially diminished their numbers in Iraq, and few show signs of returning to Iraq;

Whereas approximately 1,400,000 Christians were estimated to have lived in Iraq as of 2003, including Chaldean Catholics, Assyrian Orthodox, Assyrian Church of the East, Syriac Catholics, Syriac Orthodox, Armenians (Catholic and Orthodox), Protestants, and Evangelicals;

Whereas it is widely reported that only 500,000 to 700,000 indigenous Christians remain in Iraq as of 2009;

Whereas the Sabeen Mandaean community in Iraq reports that almost 90 percent of the members of that community either fled Iraq or have been killed, leaving only about 3,500 to 5,000 Mandeans in Iraq as of 2009;

Whereas the Yazidi community in Iraq reportedly now numbers about 500,000, a decrease from about 700,000 in 2005;

Whereas the Baha'i faith, estimated to have only 2,000 adherents in Iraq, remains prohibited in Iraq under a 1970 law;

Whereas the ancient and once-large Jewish community in Iraq now numbers fewer than 10, and they essentially live in hiding;

Whereas in 2008, the United Nations High Commissioner for Refugees (UNHCR) reported that approximately 221,000 Iraqis returned to their areas of origin in Iraq, the vast majority of whom settled into neighborhoods or governorates controlled by members of their own religious community;

Whereas many of these returnees reported returning because of difficult economic conditions in their countries of asylum, principally Syria, Jordan, Egypt, and Lebanon; and

Whereas Chaldeans, Syrians, Assyrians, and other Christians, Sabeen Mandeans, and Yazidis are not believed to be among these returnees: Now, therefore, be it

Resolved, That it is the sense of the Senate that—

(1) the United States remains deeply concerned about the plight of vulnerable religious and ethnic minorities of Iraq and is particularly concerned for the Chaldeans, Syrians, Assyrians, and other Christians, Sabeen Mandeans, Yazidis, Baha'is, Jews, and Muslim ethnic minorities, the Shabak and Turkomen, and other religious and ethnic minorities of Iraq;

(2) the United States Government and the United Nations Assistance Mission for Iraq should urge the Government of Iraq to enhance security at places of worship in Iraq, particularly where religious minorities are known to be at risk;

(3) the United States Government should continue to work with the Government of Iraq to—

(A) urgently train and deploy into the Iraqi police and security forces members of vulnerable minority communities in Iraq, including in Nineveh and other areas in which religious minorities are located, who are as representative as possible of those communities; and

(B) ensure that members of such communities—

(i) suffer no discrimination in recruitment, employment, or advancement in the Iraqi police and security forces; and

(ii) while employed in the Iraqi police and security forces, be assigned to their locations of origin, rather than being transferred to other areas;

(4) the Government of Iraq should, with the assistance of the United States Government—

(A) ensure that the upcoming national elections in Iraq are safe, fair, and free of intimidation and violence so that all Iraqis, including religious minorities, can participate in the elections; and

(B) permit and facilitate election monitoring by experts from local and international nongovernmental organizations, the international community, and the United Nations, particularly in minority areas;

(5) the Government of Iraq and the Kurdistan regional government should work towards a peaceful and timely resolution of disputes over territories;

(6) the United States Government and the United Nations Assistance Mission for Iraq should urge the Government of Iraq to work with minority communities and their representatives to develop measures to implement Article 125 of the Iraq Constitution, which guarantees “the administrative, political, cultural, and educational rights of the various nationalities, such as Turkomen, Chaldeans, Assyrians, and all the other constituents” in Nineveh and other areas where these groups are present;

(7) the Government of Iraq should take affirmative measures to reverse the legal, political, and economic marginalization of religious minorities in Iraq;

(8) the United States Government should direct assistance to projects that develop the ability of ethnic and religious minorities in Iraq to organize themselves civically and politically to effectively convey their concerns to government;

(9) the United States Government should continue to fund capacity-building programs for the Iraqi Ministry of Human Rights, the independent national Human Rights Commission, and a new independent minorities committee whose membership is selected by minority communities of Iraq;

(10) the Government of Iraq should direct the Iraqi Ministry of Human Rights to investigate and issue a public report on abuses against and the marginalization of minority communities in Iraq and make recommendations to address such abuses;

(11) the Government of Iraq should, with the assistance of the United States Government and international organizations, help ensure that displaced Iraqis considering return to Iraq have the proper information needed to make informed decisions regarding such return; and

(12) the United States Government and international organizations should continue to work with the Government of Iraq to develop the legal framework necessary to address property disputes resulting when displaced Iraqis attempt to return to their homes in Iraq.

Mr. LEVIN. Mr. President, today I submit, with Senators BROWNBACK and

DURBIN, a resolution expressing the concerns of the Senate over the plight of religious minorities in Iraq and calling on our government, the government of Iraq and the United Nations Mission in Iraq to take a series of steps designed to alleviate the dangers that members of these minority groups are confronting. Regardless of our position on the wisdom of the Iraq war, we can all acknowledge a tragic consequence of that war: the widespread persecution of religious minorities.

The statistics are chilling: of approximately 1.4 million Christians of various denominations living in Iraq in 2003, only 500,000 to 700,000 remain. Another minority group, the Sabeen Mandeans, has seen its population decline by more than 90 percent. Iraq's Jewish community, once one of the largest in the Arab world, has almost ceased to exist.

What has happened to these hundreds of thousands? Many have fled Iraq; my own hometown of Detroit, long home to a large community of Christian immigrants from Iraq, knows firsthand the challenges for families abandoning their generations-long home for a strange new country.

Others have not had that opportunity. The United States Commission on International Religious Freedom reports that members of religious minorities “have experienced targeted intimidation and violence, including killings, beatings, abductions, and rapes, forced conversions, forced marriages, forced displacement from their homes and businesses, and violent attacks on their houses of worship and religious leaders.” Leaders and members of these minority groups have been kidnapped, assassinated or forcibly removed from their homes. The United Nations High Commissioner for Refugees reported that in 2008, there were an estimated 2.8 million internally displaced persons living in Iraq. Of that 2.8 million, nearly two out of three reported fleeing their home because of a direct threat to their lives, and, of that number, almost nine out of ten said they were targeted because of their ethnic or religious identity.

While violence has declined in Iraq overall, religious minorities continue to be the targets of violence and intimidation. Members of many minority groups who have fled other parts of the country have settled in the north, only to find themselves living in some of the most unstable and violent regions of Iraq.

Our resolution addresses this tragedy in several ways. It states the sense of the Senate that the fate of Iraqi religious minorities is a matter of grave concern. It calls on the U.S. government and the U.N. to urge Iraq's government to increase security at places of worship, particularly where members of religious minorities are known to face risks. It calls for the integration of regional and religious minorities into the Iraqi security forces, and for those minority members to be stationed within their own communities.

It calls on the Iraqi government to ensure that minority citizens can participate in upcoming elections, and to enforce its constitution, which guarantees "the administrative, political, cultural, and educational rights" of minorities. And it urges a series of steps to ensure that development aid and other forms of support flow to minority communities.

I encourage the administration and the United Nations to address these steps without delay. I hope our fellow senators will join with Senator BROWNBACK, Senator DURBIN and me to voice the sense of the Senate on this important matter.

AMENDMENTS SUBMITTED AND PROPOSED

SA 2700. Mr. SANDERS submitted an amendment intended to be proposed by him to the bill H.R. 3548, to amend the Supplemental Appropriations Act, 2008 to provide for the temporary availability of certain additional emergency unemployment compensation, and for other purposes; which was ordered to lie on the table.

SA 2701. Ms. LANDRIEU submitted an amendment intended to be proposed by her to the bill H.R. 3548, supra; which was ordered to lie on the table.

SA 2702. Mr. SANDERS submitted an amendment intended to be proposed by him to the bill H.R. 3548, supra; which was ordered to lie on the table.

TEXT OF AMENDMENTS

SA 2700. Mr. SANDERS submitted an amendment intended to be proposed by him to the bill H.R. 3548, to amend the Supplemental Appropriations Act, 2008 to provide for the temporary availability of certain additional emergency unemployment compensation, and for other purposes; which was ordered to lie on the table; as follows:

Insert after section 5 the following:

SEC. 6. SENSE OF THE SENATE.

(a) FINDINGS.—The Senate finds as follows:

(1) There has been concern expressed by some across our Nation, including on the Nation's airwaves, regarding whether Congress has the constitutional authority to legislate national health care reform.

(2) Certain citizens, commentators, and public officials have questioned whether the Tenth Amendment to the Constitution of the United States precludes the Federal Government from providing related health care benefits to its people.

(3) Numerous State legislative bodies have passed resolutions raising questions regarding the scope of the Tenth Amendment to the Constitution of the United States and the constitutionality of certain Federal programs.

(4) The Federal Government has a long and successful history of providing health care benefits to its citizens through Federal programs.

(5) Among other Federal initiatives, in 1930, Congress established the Veterans Administration, an entity that provided Federal benefits, including Federal health care benefits, to veterans of the Armed Forces, and the Veterans Administration was later merged into the Department of Veterans Affairs.

(6) In 1954, Congress established the Indian Health Service to provide medical and public

health services to members of federally-recognized Indian tribes and Alaska Natives.

(7) In 1956 and 1966, respectively, Congress passed the Dependents' Medical Care Act (70 Stat. 250) and the Military Medical Benefits Amendments of 1966 (Public Law 89-614; 80 Stat. 862) in order to expand coverage to military personnel and dependents, and these programs were later merged into the TRICARE program, which provides health benefits for military personnel, military retirees, and their dependents.

(8) In 1965, the United States established the Medicare program to provide Federal health care benefits to United States citizens over the age of 65.

(9) In 1965, the United States established the Medicaid program to provide Federal health care benefits to individuals at, near, or below the Federal poverty line.

(10) In 1997, the United States established the State Children's Health Insurance Program to provide health insurance to certain children in families above the Federal poverty line.

(11) In 2009, the United States expanded the State Children's Health Insurance Program to cover an additional 4,000,000 children.

(b) SENSE OF THE SENATE.—It is the sense of the Senate that the following Federal benefit programs are in direct violation of the Tenth Amendment to the Constitution of the United States and should be terminated as soon as practicable: the Veterans Health Administration benefit programs, the Indian Health Service, TRICARE, Medicare, Medicaid, and the Children's Health Insurance Program.

SA 2701. Ms. LANDRIEU submitted an amendment intended to be proposed by him to the bill H.R. 3548, to amend the Supplemental Appropriations Act, 2008 to provide for the temporary availability of certain additional emergency unemployment compensation, and for other purposes; which was ordered to lie on the table; as follows:

At the end, add the following:

SEC. ____ . 2-YEAR EXTENSION OF LOW-INCOME HOUSING CREDIT RULES FOR CERTAIN DISASTER AREAS.

Section 1400N(c)(5) of the Internal Revenue Code of 1986 is amended by striking "January 1, 2011" and inserting "January 1, 2013".

SA 2702. Mr. SANDERS submitted an amendment intended to be proposed by him to the bill H.R. 3548, to amend the Supplemental Appropriations Act, 2008 to provide for the temporary availability of certain additional emergency unemployment compensation, and for other purposes; which was ordered to lie on the table; as follows:

Insert after section 5 the following:

SEC. 6. LIMITATIONS ON THE USE OF FUNDS APPROPRIATED.

No funds appropriated under title IV of the Supplemental Appropriations Act, 2008 (Public Law 110-252), as amended by this Act, shall be allocated to the following Federal benefit programs:

(1) The Veterans Health Administration benefit programs.

(2) The Indian Health Service.

(3) TRICARE.

(4) Medicare.

(5) Medicaid.

(6) The Children's Health Insurance Program.

ORDER OF PROCEDURE

Mr. SPECTER. Madam President, on behalf of our distinguished majority

leader, I have been asked to do what is called wrap-up.

As in executive session, I ask unanimous consent that on Tuesday, October 27, the vote on confirmation of Executive Calendar No. 470 occur at 2:20 p.m., and that the 5 minutes immediately prior to the vote be available to Senator BYRD; further, that the other provisions of the previous order remain in effect; that upon confirmation and the Senate resuming legislative session, the Senate then proceed to a period of morning business until 5:30 p.m., with Senators permitted to speak therein for up to 10 minutes, and that the time be equally divided and controlled between the leaders or their designees; that at 5:30 p.m. there be 30 minutes of debate prior to a vote on the motion to invoke cloture on the motion to proceed to H.R. 3548, with the time equally divided and controlled between the leaders or their designees; that at 6 p.m. the Senate proceed to vote on the motion to invoke cloture.

The PRESIDING OFFICER. Without objection, it is so ordered.

ADDITIONAL TEMPORARY EXTENSION OF SMALL BUSINESS PROGRAMS

Mr. SPECTER. Madam President, I ask unanimous consent that the Senate proceed to the immediate consideration of S. 1929, introduced earlier today.

The PRESIDING OFFICER. The clerk will report the bill by title.

The bill clerk read as follows:

A bill (S. 1929) to provide for an additional temporary extension of programs under the Small Business Act and the Small Business Investment Act of 1958, and for other purposes.

There being no objection, the Senate proceeded to consider the bill.

Mr. SPECTER. Madam President, I ask unanimous consent that the bill be read three times and passed, the motion to reconsider be laid upon the table, with no intervening action or debate, and any statements related to the bill be printed in the RECORD.

The PRESIDING OFFICER. Without objection, it is so ordered.

The bill (S. 1929) was ordered to be engrossed for a third reading, was read the third time, and passed, as follows:

S. 1929

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. ADDITIONAL TEMPORARY EXTENSION OF AUTHORIZATION OF PROGRAMS UNDER THE SMALL BUSINESS ACT AND THE SMALL BUSINESS INVESTMENT ACT OF 1958.

(a) IN GENERAL.—Section 1 of the Act entitled "An Act to extend temporarily certain authorities of the Small Business Administration", approved October 10, 2006 (Public Law 109-316; 120 Stat. 1742), as most recently amended by section 1 of Public Law 111-66, is amended by striking "October 31, 2009" each place it appears and inserting "April 30, 2010".

(b) EFFECTIVE DATE.—The amendments made by subsection (a) shall take effect on October 30, 2009.

COMMEMORATING THE LIVES AND WORK OF EL SALVADORAN JE- SUITS AND OTHERS

Mr. SPECTER. Madam President, I ask unanimous consent that the Senate proceed to the immediate consideration of S. Res. 321, which was submitted earlier today.

The PRESIDING OFFICER. The clerk will report the resolution by title.

The bill clerk read as follows:

A resolution (S. Res. 321) commemorating the lives and work of Jesuit Fathers Ignacio Ellacuría, Ignacio Martín-Baró, Segundo Montes, Amando López, Juan Ramon Moreno, Joaquín López y López, and housekeeper Julia Elba Ramos and her daughter Celina Mariset Ramos on the occasion of the 20th anniversary of their deaths on November 16, 1989, at the Universidad Centroamericana José Simeón Cañas located in San Salvador, El Salvador.

There being no objection, the Senate proceeded to consider the resolution.

Mr. SPECTER. Madam President, I ask unanimous consent that the resolution be agreed to, the preamble be agreed to, the motions to reconsider be laid upon the table, with no intervening action or debate, and any statements related to this matter be printed in the RECORD.

The PRESIDING OFFICER. Without objection, it is so ordered.

The resolution (S. Res. 321) was agreed to.

The preamble was agreed to.

The resolution, with its preamble, reads as follows:

S. RES. 321

Whereas in the early morning hours of November 16, 1989, 6 Jesuit priests and faculty members of the Universidad Centroamericana José Simeón Cañas ("UCA") located in San Salvador, El Salvador—Fathers Ignacio Ellacuría, Ignacio Martín-Baró, Segundo Montes, Amando López, Juan Ramon Moreno, and Joaquín López y López—and housekeeper Julia Elba Ramos and her daughter, Celina Mariset Ramos, were executed by members of the Salvadoran Army;

Whereas Father Ignacio Ellacuría, aged 59, was since 1979 rector of the UCA and was an internationally-respected intellectual and advocate for human rights and for a negotiated solution to the Salvadoran civil conflict;

Whereas Father Ignacio Martín-Baró, aged 44, was the vice rector of the UCA, a leading analyst of national and regional affairs, the founder and director of the respected polling organization, the Public Opinion Institute, former dean of students, dean of the psychology department, an internationally-renowned pioneer in the field of social psychology, and pastor of the rural community of Jayaque;

Whereas Father Segundo Montes, aged 56, was dean of the department of social sciences, a sociology professor at the UCA, and the founder and director of the Human Rights Institute at the UCA, who did extensive work on Salvadoran refugees in the United States during the period of the Salvadoran conflict, including providing documentation and advice to Members of Congress on refugee issues;

Whereas Father Amando López, aged 53, was a philosophy and theology professor at the UCA, was the former director of the Jesuit seminary in San Salvador, and served as pastor of the Tierra Virgen community in

Soyapango, a poor neighborhood in the periphery of San Salvador;

Whereas Father Juan Ramon Moreno, aged 56, was a professor of theology at the UCA, a former novice-master for the Jesuits, and a tireless pastoral worker and spiritual guide;

Whereas Father Joaquín López y López, aged 71, was one of the creators of the UCA and the founder, organizer, and director of Fe y Alegría (Faith and Joy), an organization to address the lack of education in El Salvador, which opened 30 educational centers in marginalized communities throughout El Salvador where 48,000 people received vocational training and education;

Whereas Julia Elba Ramos, aged 42, was the cook and housekeeper for the Jesuit seminarians at the UCA and the wife of Obdulio Lozano, the UCA gardener and groundskeeper;

Whereas Celina Mariset Ramos, aged 16, had finished her first year of high school at the José Damian Villacorta Institute in Santa Tecla, El Salvador and was staying with her mother the night of November 15, 1989;

Whereas the 6 Jesuit priests dedicated their lives to advancing education in El Salvador, protecting and promoting human rights and the end of conflict, and identifying and addressing the economic and social problems that affected the majority of the Salvadoran population;

Whereas the 6 Jesuit priests, as faculty and administrators at the UCA, educated many students throughout the 1970s and 1980s, students who subsequently became Salvadoran government, political, and civil society leaders, and thus helped facilitate communication, dialogue, and negotiations, even during the turbulent years of the armed conflict;

Whereas these 6 priests and 2 women joined the more than 75,000 noncombatants who perished during the Salvadoran civil war;

Whereas on December 6, 1989, Speaker of the House of Representatives Thomas Foley appointed the Speaker's Task Force on El Salvador consisting of 19 Members of the House of Representatives and chaired by Representative John Joseph Moakley of Boston, Massachusetts, to monitor the Salvadoran government's investigation into the murders of the Jesuit priests and 2 women and to look into related issues involving respect for human rights and judicial reform in El Salvador;

Whereas the Speaker's Task Force on El Salvador found that members of the high command of the Salvadoran military were responsible for ordering the murder of the Jesuits and 2 women and for obstructing the subsequent investigation into the crimes;

Whereas the United Nations Commission on the Truth for El Salvador (the "Truth Commission") was established under terms of the January 1992 Peace Accords that ended El Salvador's 12 years of war and was charged to investigate and report to the Salvadoran people on human rights crimes committed by all sides during the course of the war;

Whereas on March 15, 1993, the Truth Commission confirmed the findings of the Speaker's Task Force on El Salvador;

Whereas on September 28, 1991, a Salvadoran jury found 2 Salvadoran military officers guilty of the murders, including Salvadoran Army Colonel Guillermo Alfredo Benavides Moreno, the first time in Salvadoran history in which high-ranking military officers were convicted in a Salvadoran court of law of human rights crimes;

Whereas the UCA remains dedicated to advancing and expanding educational opportunity and providing the highest quality of academic excellence in its studies and courses and maintains a commitment to human rights and social justice;

Whereas the 28 Jesuit colleges and universities in the United States, which represent many of the highest quality academic communities in the Nation, have maintained a sense of solidarity with the UCA and the people of El Salvador and have annually observed the November 16th anniversary of the martyred Jesuits and women;

Whereas in the United States, in El Salvador, and around the world, university programs, academic and scholarly institutes, libraries, research centers, pastoral programs, spiritual centers, and programs dedicated to educational achievement, social justice, human rights, and alleviating poverty have been dedicated in the names of the Jesuit martyrs;

Whereas the international and Salvadoran outcry in response to the deaths of the 6 Jesuits and 2 women and the subsequent investigations into this crime served as a catalyst for negotiations and contributed to the signing of the 1992 Peace Accords, which have allowed the people and the Government of El Salvador to achieve significant progress in creating and strengthening democratic political, economic, and social institutions; and

Whereas November 16, 2009, marks the 20th anniversary of the deaths of the 8 spiritual, courageous, and generous priests, educators, and laywomen: Now, therefore, be it

Resolved, That the Senate—

(1) commemorates the lives and work of Father Ignacio Ellacuría, Father Ignacio Martín-Baró, Father Segundo Montes, Father Amando López, Father Juan Ramon Moreno, Father Joaquín López y López, Julia Elba Ramos, and Celina Mariset Ramos;

(2) extends sympathy to the families, friends, colleagues, and religious communities of the 6 Jesuit priests and 2 laywomen;

(3) recognizes the continuing academic, spiritual, and social contributions of the Universidad Centroamericana José Simeón Cañas ("UCA") in San Salvador, El Salvador;

(4) commends the 28 Jesuit colleges and universities in the United States for their solidarity with the UCA and annual remembrances of the Jesuit martyrs;

(5) continues to find inspiration in the lives and work of the Jesuit martyrs;

(6) remembers the seminal reports by Representative John Joseph Moakley and the Speaker's Task Force on El Salvador in investigating the murders of the 6 priests and 2 laywomen;

(7) acknowledges the role played by the Speaker's Task Force on El Salvador, Representative John Joseph Moakley, the Jesuit leadership of the UCA, and the Salvadoran judicial investigation and convictions in advancing negotiations to end the war, such that the deaths of the Jesuit martyrs and laywomen contributed directly to achieving the peace to which they had dedicated their lives;

(8) calls upon the people of the United States, academic institutions, and religious congregations to participate in local, national, and international events commemorating the 20th anniversary of the martyrdom of the 6 Jesuit priests and 2 laywomen;

(9) recognizes that, while significant progress has been made during the post-war period, social and economic hardships persist among many sectors of Salvadoran society; and

(10) calls upon the President, the Secretary of State, the Administrator of the United States Agency for International Development, and other Federal departments and agencies to support and collaborate with the Government of El Salvador and other public,

private, nongovernmental, and religious organizations in efforts to reduce poverty and hunger and to promote educational opportunity, human rights, the rule of law, and social equity for the people of El Salvador.

MEASURE READ THE FIRST TIME—S. 1927

Mr. SPECTER. Madam President, I understand that S. 1927, introduced earlier today by Senator DODD, is at the desk, and I ask for its first reading.

The PRESIDING OFFICER. The clerk will report the bill by title for the first time.

The bill clerk read as follows:

A bill (S. 1927) to establish a moratorium on credit card interest rate increases, and for other purposes.

Mr. SPECTER. I now ask for its second reading and object to my own request.

The PRESIDING OFFICER. Objection having been heard, the bill will receive its second reading on the next legislative day.

Mr. SPECTER. Madam President, for anybody watching C-SPAN2—if anybody is watching—a word of explanation might be somewhat helpful. This is a procedure to set this particular resolution, S. Res. 1927, in procedural posture so that when I, as the leader, ask for its second reading, and then say “I object to my own request,” it is procedural, not a reversal of position.

ORDERS FOR TUESDAY, OCTOBER 27, 2009

Mr. SPECTER. Madam President, I ask unanimous consent that when the

Senate completes its business today, it adjourn until 10 a.m. tomorrow, Tuesday, October 27; that following the prayer and the pledge, the Journal of proceedings be approved to date, the morning hour be deemed to have expired, the time for the two leaders be reserved for their use later in the day and there be a period of morning business for 1 hour, with Senators permitted to speak therein for up to 10 minutes each, with the time equally divided and controlled between the two leaders or their designees, with the Republicans controlling the first half and the majority controlling the second half; that following morning business, the Senate proceed to executive session to consider the nomination of Irene Berger of West Virginia to be U.S. District Court Judge for the Southern District of West Virginia, as provided under the previous order.

Finally, I ask that the Senate recess from 12:30 until 2:15 p.m. to allow for the weekly caucus luncheons.

The PRESIDING OFFICER. Without objection, it is so ordered.

PROGRAM

Mr. SPECTER. Madam President, under a previous order, tomorrow, at 2:20 p.m., the Senate will proceed to vote on the confirmation of the Berger nomination. Following the vote, the Senate will turn to a period of morning business until 5:30 p.m. The Senate will then resume the motion to proceed to H.R. 3548, and at 6 p.m. proceed to a cloture vote on the motion to proceed to H.R. 3548, the Unemployment Compensation Extension Act.

ADJOURNMENT UNTIL 10 A.M. TOMORROW

Mr. SPECTER. Madam President, if there is no further business to come before the Senate, I ask unanimous consent that it adjourn under the previous order.

There being no objection, the Senate, at 5:58 p.m., adjourned until Tuesday, October 27, 2009, at 10 a.m.

NOMINATIONS

Executive nominations received by the Senate:

EQUAL EMPLOYMENT OPPORTUNITY COMMISSION

P. DAVID LOPEZ, OF ARIZONA, TO BE GENERAL COUNSEL OF THE EQUAL EMPLOYMENT OPPORTUNITY COMMISSION FOR A TERM OF FOUR YEARS, VICE RONALD S. COOPER, RESIGNED.

DEPARTMENT OF STATE

PHILIP S. GOLDBERG, OF THE DISTRICT OF COLUMBIA, TO BE AN ASSISTANT SECRETARY OF STATE (INTELLIGENCE AND RESEARCH), VICE RANDALL M. FORT, RESIGNED.

DEPARTMENT OF HOMELAND SECURITY

CARYN A. WAGNER, OF VIRGINIA, TO BE UNDER SECRETARY FOR INTELLIGENCE AND ANALYSIS, DEPARTMENT OF HOMELAND SECURITY. (NEW POSITION)

IN THE AIR FORCE

THE FOLLOWING NAMED OFFICER FOR APPOINTMENT IN THE UNITED STATES AIR FORCE TO THE GRADE INDICATED WHILE ASSIGNED TO A POSITION OF IMPORTANCE AND RESPONSIBILITY UNDER TITLE 10, U.S.C., SECTION 601:

To be lieutenant general

MAJ. GEN. KURT A. CICHOWSKI

IN THE ARMY

THE FOLLOWING NAMED OFFICER FOR APPOINTMENT IN THE UNITED STATES ARMY TO THE GRADE INDICATED UNDER TITLE 10, U.S.C., SECTION 624:

To be brigadier general

COL. DAVID A. TEEPLES